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TANGANYIKA TERRITORY.

Annual Medical and Sanitary Report

FOR THE YEAR ENDING

31st December 1930

Price 2/50

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DAR ES SALAAM
PRINTED BY THE GOVERNMENT PRINTER
1932

OFFICE OF THE
DIRECTOR OF MEDICAL AND SANITARY SERVICES,
DAR ES SALAAM,
TANGANYIKA TERRITORY.
10*th June*, 1932.

Sir,

I have the honour to submit, for the information of His Excellency the Governor and for transmission to the Right Honourable the Secretary of State for the Colonies, the Medical Report on the health and sanitary condition of the Tanganyika Territory for the year 1930, together with the Returns, etc., appended thereto.

I have the honour to be,
Sir,
Your obedient servant,
RAYMOND BURY,
Acting Director of Medical and Sanitary Services,
Tanganyika Territory.

THE HONOURABLE
THE CHIEF SECRETARY TO THE GOVERNMENT.
DAR ES SALAAM.

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TANGANYIKA TERRITORY.

Annual Medical Report for 1930.

SECTION I.—ADMINISTRATION.

(a) Staff.

European:

Director of Medical and Sanitary Services.
Deputy Director of Medical Service.
Deputy Director of Sanitary Service.
Deputy Director of Laboratory Service.
6 Senior Medical Officers.
5 Senior Health Officers.
1 Sleeping Sickness Officer.
44 Medical Officers.
2 Dental Surgeons.
1 Assistant Bacteriologist.
1 Entomologist.
1 Analytical Chemist.
1 Matron.
4 Senior Nursing Sisters.
2 Senior Health Visitors.
7 Health Visitors.
33 Nursing Sisters.
2 Laboratory Assistants.
1 Accountant.
1 Chief Clerk.
2 Clerks.
1 Storekeeper.
2 Assistant Storekeepers.
1 Hospital Quartermaster.
1 Medical Instructor.
1 Assistant Medical Instructor.
1 Superintendent, Mental Hospital.
1 Matron, Mental Hospital.
2 Senior Sanitary Superintendents.
25 Sanitary Superintendents.
1 Dental Mechanic.

SPECIAL EXPENDITURE.

(For Kahama Maternity and Child Welfare Research.)

European:

1 Medical Officer.
2 Sisters and Health Visitors.

Asiatic:

4. Sub-Assistant Surgeons.

African:

2 Motor Drivers.
20 Ayahs.

Asiatic:

1 Assistant Surgeon.
3 Senior Sub-Assistant Surgeons.
58 Sub-Assistant Surgeons.
36 Compounders.
1 Special Grade Clerk.
2 1st Grade Clerks.
4 2nd Grade Clerks.
14 3rd and 4th Grade Clerks.
2 Sanitary Inspectors.

African:

10 Clerks.
84 Dispensers.
218 Sanitary Inspectors.
7 Vaccinators.
685 Hospital Orderlies, Nurses and Menials.
1,129 Sanitary Labourers.
4 Motor Drivers.

APPOINTMENTS.

European:

Dr. R. Bury to be Deputy Director of Medical Service, 20th January.
Dr. J. M. Campbell to be a Senior Health Officer, 5th November.
Miss E. A. Cordwell to be a Sister and Health Visitor, 11th April.
Miss H. M. Barr ,, ,, 6th June.
Miss O. M. Cox ,, ,, 4th July.

Miss I. Mackenzie to be a Nursing Sister, 30th January.
Miss J. H. Hood ,, ,,
Miss E. E. Wooltorton ,, ,,
Miss C. A. Mackintosh ,, ,,
Miss M. P. L. Hutton ,, ,,
Miss M. A. Fraser ,, ,,
Miss G. M. Hawthorne ,, 18th April.
Miss H. F. Kilby ,, 11th September.
Miss E. Thomas ,, ,,
Miss J. P. Spence ,, 24th October.
Miss G. F. F. Waite ,, 21st November.
Miss B. V. Carson ,, 19th December.
Miss L. J. Loader ,, ,,
Mr. F. O. Hersee to be a Sanitary Superintendent, 17th January.
Mr. S. J. Goode ,, 17th July.
Mr. J. G. Findlay ,, ,,
Mr. J. E. Mountjoy ,, 14th August.
Mr. D. Souter ,, 29th ,,
Mr. J. E. Miller ,, 1st September.
Mr. P. McDevitt ,, 11th ,,
Mr. V. L. Roberts ,, 16th October.
Mr. H. H. Carter ,, 20th ,,
Mr. J. Hetherington to be an Assistant Storekeeper, 14th March.

Asiatic:

Mr. S. B. Adval to be a Sub-Assistant Surgeon, 29th January.
Mr. V. M. Ghanakar ,, 4th June.
Mr. Dhramchand to be Compounder, 30th January.
Mr. K. R. Waghmare ,, 7th July.
Mr. G. O. Christian ,, 1st August.
Mr. S. Samuel to be a 1st Grade Clerk, 26th August, transferred from the Administration Department.
Mr. W. M. Noronha to be a 4th Grade Clerk, 1st November.

ACTING APPOINTMENTS.

European:

Dr. A. H. Owen, Acting Director of Medical and Sanitary Services from 4th August to 8th September.
Dr. G. R. C. Wilson, Acting Deputy Director of Medical Service from beginning of the year to 13th December.
Dr. H. J. O'D. Burke-Gaffney, Acting Deputy Director of Laboratory Service from 5th January to 23rd November.
Dr. F. R. Lockhart, Acting Senior Medical Officer from 1st December to end of the year.
Dr. P. S. Bell, Acting Senior Medical Officer from 7th May to 2nd December.
Dr. R. Mackay, Acting Senior Health Officer from beginning of the year to 26th July.
Dr. F. R. Lockhart, Acting Senior Health Officer from 15th August to 1st September.
Dr. W. J. Aitken, Acting Senior Health Officer from 15th January to 6th November and 7th December to end of the year.
Miss M. Donald, Acting Matron from 14th December to end of the year.
Mr. N. McL. Moore, Acting Chief Clerk from 1st April to end of the year.
Miss R. D. Whiteoak, Acting Sister and Health Visitor from 14th January to 20th July.
Miss M. A. Fraser, Acting Sister and Health Visitor from 19th November to end of the year.
Mr. T. Bell, Acting Senior Sanitary Superintendent from beginning of the year to 25th August.
Mr. W. M. Mackay, Acting Senior Sanitary Superintendent from 9th February to 1st October.
Mr. C. Harlen, Acting Superintendent, Mental Hospital, from 5th May to 3rd December.

Promotions.

European:

Dr. A. McA. Blackwood, Medical Officer, to be Senior Medical Officer, 20th January.
Dr. A. I. Meek, Medical Officer, to be Senior Health Officer, 1st April.
Mr. H. M. Fisher, Dental Surgeon, to be Senior Dental Surgeon, 1st April.
Miss E. L. Kemsley, Senior Nursing Sister, to be Senior Health Visitor, 1st April.
Miss B. G. Allardes, Sister and Health Visitor, to be Senior Health Visitor, 1st April.
Miss K. Thompson, Nursing Sister, to be Senior Nursing Sister, 24th March.
Miss A. Muncaster, Nursing Sister, to be Senior Nursing Sister, 1st April.
Mr. J. L. Mason, Chief Clerk, to be Accountant, 1st April.

Retirements.

Dr. J. Pugh, Deputy Director of Medical Service, 20th January.
Miss J. Fraser, Senior Nursing Sister, 24th March.

Resignations.

European:

Miss E. Neale, Sister and Health Visitor, 30th June.
Miss E. Ashberry, Sister and Health Visitor, 7th November.
Miss J. Turnbull, Nursing Sister, 24th December.

Asiatic:

Mr. J. P. Kotwal, 3rd Grade Clerk, 31st October.

Appointments Terminated.

European:

Mrs. E. B. Maclean, Nursing Sister, 23rd May.
Miss M. Kay, Nursing Sister, 8th December.
Mr. R. Kildea, Hospital Quartermaster, 14th April.

Asiatic:

Mr. A. R. de Silva, Compounder, 1st September.

Deaths.

European:

Mr. S. J. Goode, Sanitary Superintendent, 9th August.

Asiatic:

Mr. Abdul Satar Khan, Compounder, 28th April.

Invalidings.

European:

Mrs. E. L. Evans, Nursing Sister, 5th May.

Asiatic:

Mr. P. V. Mathew, Compounder, 4th February.

(b) Legislation.

The following Ordinances, Rules and Regulations made under Ordinances affecting public health were enacted during the year:—

Rules governing the Manufacture, Sale, Distribution or Possession of Cocaine, Morphine, etc.
Rules governing the Importation of Cocaine, Morphine, etc.
The Mining (Safe Working) Regulations.
Rules made under the Infectious Diseases Ordinance giving powers to examine and question persons entering or leaving an infected area.
Township (Building) Rules made under the Townships Ordinance.

(c) Financial.

	£	
Revenue	13,186	
Expenditure	274,715	✓

(See also Table II, page 54).

SECTION II.—PUBLIC HEALTH.

(a) General Remarks.

Owing to the urgent need for economy and the high cost of printing it has been necessary to restrict this report to a summary of the work of the Medical and Sanitary Department during 1930 and to omit all reproductions of photographs and notes of interesting cases which have, during recent years, been a characteristic feature of the Annual Medical Reports of the Territory.

Expenditure.

The sum of £270,912 was provided in the approved estimates for the financial year 1930-31 for Medical Services, an increase of £22,679 over the actual expenditure during the financial year 1929-30. The provision of seven additional European Sanitary Superintendents and larger numbers of trained African Dispensers and Sanitary Inspectors was responsible for £5,767 of this sum. The staff of Senior Medical Officers, Senior Health Officers and Medical Officers remained unchanged. Details of expenditure will be found on pages 54 to 55 of this report.

Hospitals and Asylums.

Minor improvements were made and additional accommodation provided at many of the hospitals in the Territory. More important work was carried out at the native hospitals at Bukoba, Tabora, Mwanza and Tanga, extensions were also made to the Mental Hospital at Dodoma. Quarters for Medical staff were built at Sumbawanga, Kigoma, Lindi, Tanga, Moshi and Biharamulo.

Attendance at Hospitals.

There was a decrease of 418 in the in-patients and an increase of 33,782 in the out-patients treated at Government hospitals, the figures for the last five years being as follows:—

	In-Patients	Out-Patients	Total
1926	26,640	342,653	369,293
1927	27,819	261,899	289,718
1928	31,589	356,106	387,695
1929	33,470	360,001	393,471
1930	33,052	393,783	426,835

These figures do not include admissions and attendances at Maternity and Child Welfare Clinics nor at Tribal Dispensaries.

Maternity and Child Welfare.

The Government contributed £1,050 towards the salaries of trained Health Visitors employed by the Church Missionary Society and £300 to assist Dr. Maynard in her work at Kolondoto near Shinyanga. The figures for all clinics during the last four years are given below:—

	1927	1928	1929	1930
Total number of confinements admitted to clinics	507	1,645	2,521	2,399
Total number of confinements attended elsewhere	114	167	55	49
Total number of new cases (in- and out-patients) seen at clinics:—				
Mothers	10,736	16,686	28,858	24,569
Children	16,519	24,870	38,682	31,553
Total number of attendances at clinics:—				
Mothers	27,745	74,340	148,006	164,833
Children	36,725	90,747	197,021	219,133

Schools for Dispensers.

At the end of the year seventy-six dispensers who had completed their training were employed in medical establishments throughout the Territory. In addition twelve who had finished their course at the Dar es Salaam Medical School were being given their final training at the clinical school attached to Tabora Hospital. Eighteen remained under tuition at the Dar es Salaam Medical School.

Tribal Dressers.

The Native Administrations continue to take the greatest interest in the Tribal Dispensaries. Although the Tribal Dispensaries are under the control of the Native Administrations returns are sent to the Medical Officers in charge of the districts who are also responsible for training the dressers. The popularity of these institutions amongst the local natives is demonstrated by the very large increase in the number of cases treated. The figures for the last three years are as follows:—

1928	141,300
1929	190,545
1930	352,423

Number of Tribal Dispensaries by Provinces.

	Number open during 1930/31	Number to be opened 1931/32
Bukoba	23	3
Central	21	—
Eastern	26	3
Iringa	40	—
Kigoma	11	13
Lindi	17	—
Mahenge	29	2
Mwanza	46	20
Northern	8	3
Tabora	43	1
Tanga	24	2
TOTAL	288	47=335

Tuberculosis.

The Tuberculosis unit working on the slopes of Kilimanjaro continued its investigations during the year. The Medical Officer in charge has been carrying out intradermal tests both in this area and on the tribes which inhabit the neighbouring mountain of Meru.

At the end of 1930 a laboratory and quarters for the staff for a special investigation were in course of construction at Moshi. A Medical Officer who has received courses of instruction while on leave and returned to the Territory and commenced work in a temporary laboratory. Another Medical Officer now under training in England will arrive soon.

Apparatus including a travelling X-ray machine has been obtained and research work on Tuberculosis will be carried out in this area during 1931. These investigators will work in close collaboration with the Officer in charge of the Kilimanjaro area. Funds for the Special Research at Moshi have been provided by a free grant from the Colonial Development Fund.

Venereal Diseases and Yaws.

The treatment of these diseases with Bismuth Salts continues to attract large numbers of patients. Reports received state that whereas a few years ago natives obviously suffering from Yaws, could be met with in numbers on any road in the district, at the present time it is rare to meet a case. The total number of cases treated during the last six years are as follows:—

	Syphilis		Yaws
1925	11,288	...	74,638
1926	17,751	...	96,624
1927	20,804	...	120,263
1928	24,367	...	127,439
1929	25,752	...	126,328
1930	25,864	...	137,112
TOTALS	125,826	...	682,404

Health of Prisoners.

Although the general health of the prisoners was good throughout the Territory there was an increase in the death rate as compared with 1929. The increase was spread over the different prisons in the Territory and no abnormal cause of death can be ascertained.

Statistics for the last six years are as follows:—

	1925	1926	1927	1928	1929	1930
Number of deaths	59	60	32	49	23	48
Daily average number of prisoners during the year ...	1,732·12	1,858·80	1,695·91	1,826·50	1,905·10	2,106·10
Deaths per 1,000 to average number of prisoners ...	34·00	32·20	18·80	26·83	12·07	22·79

The full report on the health of prisoners is on pages 24 to 42.

Sanitation.

The sanitary condition of the townships in the Territory has been satisfactory during the year. Motor transport for refuse collection and disposal has been provided at Moshi, Tanga, Mwanza and Kigoma. The increased staff of European Sanitary Superintendents has resulted in closer supervision of the sanitary labourers. One Superintendent has been employed in touring the whole of the Tanga Province inspecting the work of the African District Sanitary Inspectors in the villages. From his reports it appears that, although conditions vary greatly in different districts, very considerable general improvement in the sanitation of the rural communities has resulted from the work of the Native Inspectors stationed in this province. A representative of a firm of Consulting Sanitary Engineers has been carrying out a survey of Dar es Salaam in order to prepare a complete drainage and sewerage scheme for the town. The ever increasing number of houses having a water carriage system of sanitation makes such a scheme an urgent necessity.

The special investigation at Kahama was continued during the year. Owing to the financial crisis this work will be gradually closed down during 1931 and a final report showing the results obtained since the investigation commenced in 1927 will be available next year.

Infectious Disease.

Tanganyika Territory has for several years been remarkably free from serious infectious disease. 1930 however has provided several epidemics of smallpox which have given rise to much anxiety particularly in the case of the outbreak in the Dar es Salaam district which affected the capital and chief port of the Territory.

The following vaccinations were performed throughout the Territory during the last four years:—

1927		1928		1929		1930
286,289	...	307,258	...	322,702	...	802,065

Great credit is due to the Vaccine Lymph Institute at Mpwapwa which provided the greatly increased quantity of vaccine required.

Plague.

Cases of plague were reported from only one district in the Territory, these occurred at intervals during the year in the endemic area near Mbulu in the Northern Province. A European Sanitary Superintendent, who is provided with apparatus obtained from South Africa, is at present touring this district for the purpose of destroying rats in the infected area.

Tables showing the incidence of Dangerous Infectious Disease are given on page 8 of this report.

Leprosy.

The abolition of compulsory segregation together with treatment by injection has induced large numbers of early cases to present themselves for treatment.

The Native Authorities show keen interest and have rendered much assistance while the help of the various Missionary Societies is invaluable. The British Empire Leprosy Relief Association provided £250 for buildings at the Church Missionary Society Hospital at Kilimatinde and £50 for the Capuchin Fathers at Kipatimu in addition to free supplies of anti-leprotic drugs. The funds provided by the Government amounted to £4,800.

Sleeping Sickness.

The policy, which has been in force for many years in the Territory, of removing natives from infected districts and concentrating them in fly-free areas outside the forest or in extensive clearings, has continued to give satisfactory results in conjunction with treatment with Bayer "205" and Tryparsamide.

The only area where the disease is, at the present time, a serious menace to the native inhabitants is in the Tabora Province north of the Central Line and even here the work done by the Sleeping Sickness Department during the last three years has resulted in a much reduced incidence of the disease. While the local natives remain in the clearings provided there is little or no danger of infection but a proportion are unable to resist the temptation to visit the fly-infested forest for the purpose of honey collecting, fishing and hunting and are then liable to become infected.

The Research Station for the investigation of *Trypanosoma Rhodesiense* was almost completed at the end of the year and two Medical Officers had already commenced work.

A table showing the incidence of sleeping sickness during the last four years follows:—

Provinces	New cases diagnosed during the year				Deaths			
	1927	1928	1929	1930	1927	1928	1929	1930
Mwanza	120	172	143	221	68	69	53	64
Tabora	109	1,443	3,028	1,431	19	235	461	425
Kigoma	9	4	23	18	—	1	4	4
Ufipa	62	101	60	64	54	59	55	13
Lindi	60	25	4	5	29	28	7	3
Central	—	6	—	—	—	3	—	—
Mahenge	—	—	4	1	—	—	—	—
Northern	—	—	—	3	—	—	—	—
Bukoba	—	—	—	7	—	—	—	1
TOTAL	360	1,751	3,262	1,750	170	395	580	510

Epidemic, Endemic and Infectious Diseases.

The Enteric Group. Thirty-two cases with eight deaths were reported from Government Hospitals. Of these twenty-four with six deaths were classified as typhoid fever. A small local outbreak occurred at Moshi. Infection was almost certainly from a convenient but contaminated water hole. This was cleaned and covered with concrete and no further cases have been reported.

Relapsing Fever. This disease is widespread throughout the Territory but the mortality is low 462 cases were reported from twenty-eight stations with a total of eight deaths.

Malaria. 37,927 cases of all forms of Malaria were treated at Government Hospitals. Of these 28,517 were classified as Subtertian. There were 53 deaths, a mortality rate of 0·14 per cent.

Blackwater Fever. Sixty-six cases with seventeen deaths were reported. The figures of 1927, 1928 and 1929 were 72, 67 and 88 respectively.

Dysentery. 998 cases of Amœbic dysentery, 225 of Bacillary and 583 Undefined were reported during the year; a total of 1,806 with 74 deaths of these 545 with 45 deaths occurred at Morogoro and Kilosa, large plantation areas employing very considerable numbers of imported labourers.

Yaws. Yaws still provides a very large proportion of the cases attending Government Hospitals. In these institutions during 1930 77,277 cases were treated with 14 deaths. Intramuscular injections continue to be popular with the patients.

Syphilis. 16,795 cases with 26 deaths were treated at Government Hospitals, of these 7,613 or approximately 45 per cent. of these attended at Mwanza and Bukoba on the shores of Lake Victoria.

Gonorrhœa. 6,499 persons attended for treatment, there were six deaths.

Soft Chancre. This disease is rare, only 82 cases being reported, the mortality was nil.

Infectious Diseases.

Early in the year an outbreak of smallpox was reported from a village near Dar es Salaam. After exhaustive enquiries the original source of infection was found to have been an Indian passenger who arrived at Dar es Salaam from Bombay on 30th December, 1929, after a voyage of only ten days duration. The disease was of a severe type amongst native patients and spread to a large number of villages round the capital, cases also occurred in the town itself. An intensive vaccination campaign eventually brought the epidemic under control. 79,685 vaccinations were done in Dar es Salaam Township and 147,578 in the surrounding district. The efficacy of the measures taken is shown by the fact that only twenty-two cases with five deaths occurred in the densely populated township of Dar es Salaam. The total cases in the whole district were 2,894 with 574 deaths.

The outbreak in Rungwe District on the Northern Rhodesia border continued throughout the year although it never assumed epidemic proportions. There is much traffic to and fro over the border and control is difficult in this inaccessible and mountainous area.

It is fortunate that recent increases in the European staff of the Medical Department made it possible to provide European supervision of practically every outbreak which occurred. An ample supply of very satisfactory locally made vaccine was always available. 1,613,350 doses were issued during the year.

The Territory was free from plague with the exception of a few cases reported from the endemic area round Mbulu in the Northern Province.

A table showing the incidence of Dangerous Infectious Diseases during the last seven years follows:—

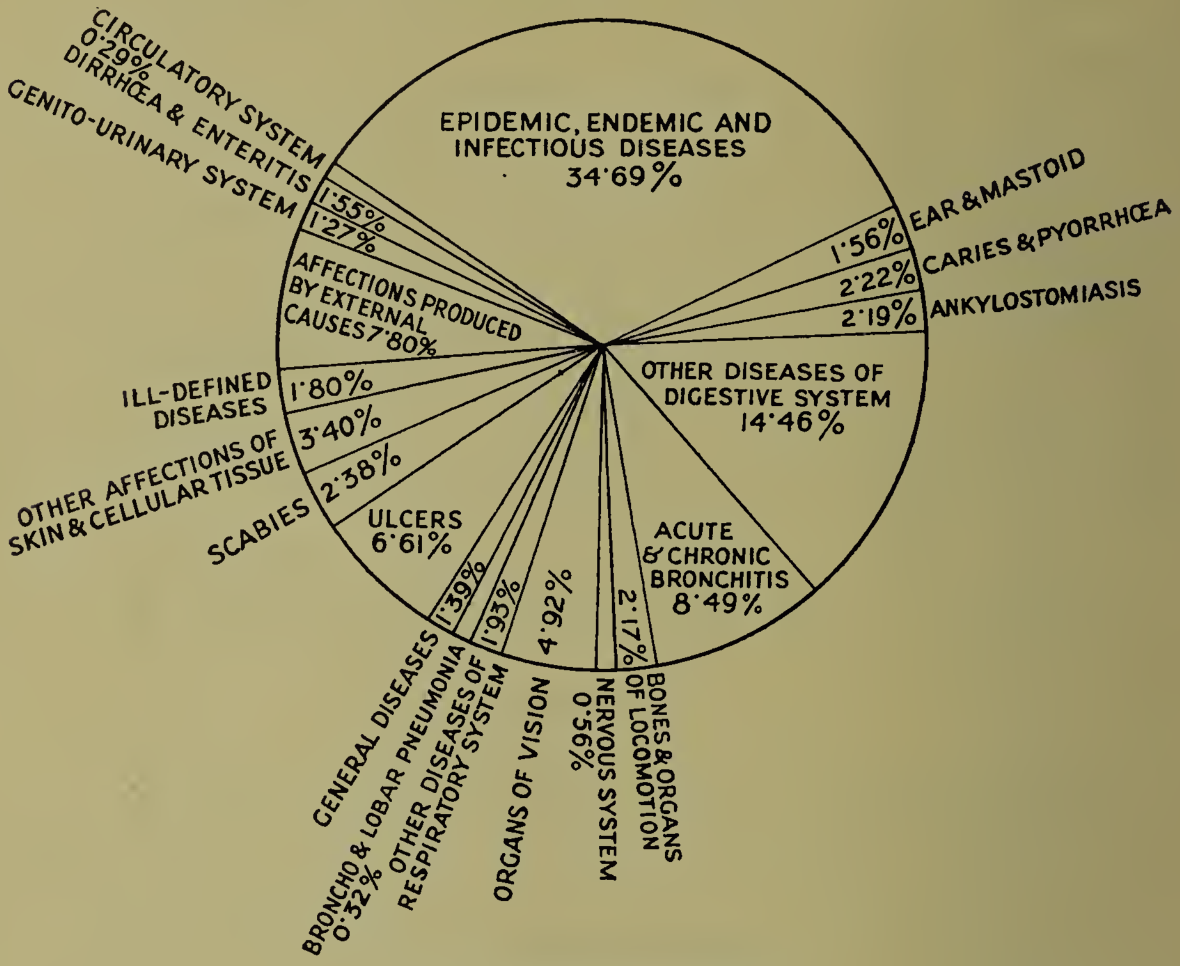
Year	Small-pox		Cerebro-spinal Meningitis		Plague		Influenza	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
1924	30	12	2	1	42	35	—	38
1925	1,388	466	6	3	44	27	692*	64
1926	22	—	8	4	6	6	1,552*	209
1927	84	8	7	6	13	10	—	—
1928	26	—	7	3	43	42	540	8
1929	178	22	10	6	—	—	33	—
1930	4,335	754	6	3	15	15	56	—

*Total number not known, non-serious cases not being reported.

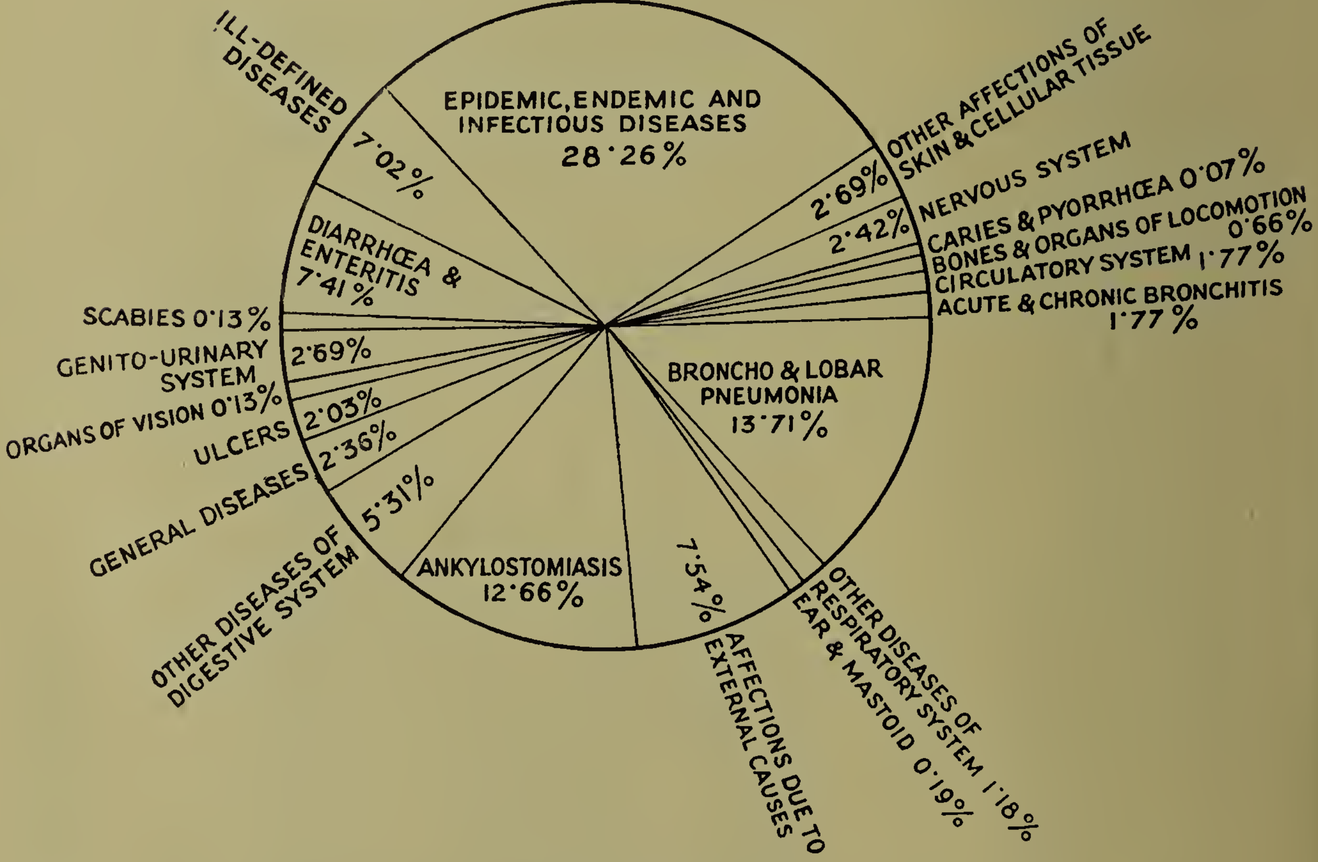
Table showing Total Cases, Percentages of Groups to Total Cases Treated, Deaths and Percentage of Deaths to Total Number of Deaths.

	Cases			Deaths			Percentage to total number of cases treated			Percentage of deaths to total number of deaths		
	1928	1929	1930	1928	1929	1930	1928	1929	1930	1928	1929	1930
Epidemic, endemic and infectious diseases ...	150,500	140,484	148,685	334	558	431	37·10	35·49	34·69	27·08	34·55	28·26
General diseases	5,731	6,206	5,959	51	42	36	1·40	1·57	1·39	4·14	2·60	2·36
Diseases of the nervous system	3,285	2,127	2,382	43	36	37	0·81	0·54	0·56	3·49	2·23	2·42
,, organs of vision	19,789	21,284	21,093	1	—	2	4·88	5·38	4·92	0·08	—	0·13
,, ear and mastoid sinus ...	6,023	5,954	6,682	1	—	3	1·50	1·50	1·56	0·08	—	0·19
,, circulatory system	1,591	1,334	1,251	18	26	27	0·40	0·33	0·29	1·46	1·61	1·77
Acute and chronic bronchitis	33,318	30,427	36,396	3	—	27	8·22	7·69	8·49	0·24	—	1·77
Lobar and broncho-pneumonia	1,264	1,199	1,384	186	221	209	0·31	0·30	0·32	15·08	13·68	13·71
Other diseases of the respiratory system ...	6,509	8,550	8,284	29	29	18	1·61	2·16	1·93	2·35	1·80	1·18
Caries and pyorrhœa	9,635	10,033	9,518	1	—	1	2·38	2·53	2·22	0·08	—	0·07
Diarrhœa and enteritis	8,200	7,437	6,636	57	117	113	2·02	1·88	1·55	4·62	7·24	7·41
Ankylostomiasis	8,410	8,054	9,375	202	248	193	2·07	2·03	2·19	16·39	15·36	12·66
Other diseases of the digestive system ...	52,118	56,800	61,966	48	60	81	12·85	14·35	14·46	3·90	3·72	5·31
Diseases of the genito-urinary system ...	5,137	5,553	5,445	26	41	41	1·24	1·40	1·27	2·11	2·54	2·69
Ulcers	25,574	24,516	28,345	23	29	31	6·31	6·19	6·61	1·87	1·80	2·03
Scabies	8,799	7,228	10,193	—	—	2	2·17	1·83	2·38	—	—	0·13
Other diseases of skin and cellular tissue ...	13,213	12,367	14,581	49	39	41	3·26	3·12	3·40	3·98	2·41	2·69
Diseases of bones and organs of locomotion	8,056	9,490	9,287	4	11	10	1·98	2·40	2·17	0·32	0·68	0·66
Affections produced by external causes ...	35,275	31,303	33,422	95	90	115	8·69	7·91	7·80	7·70	5·57	7·54
Ill-defined and other diseases	3,231	5,558	7,709	62	68	107	0·80	1·40	1·80	5·03	4·21	7·02
	405,658	395,904	428,593	1,233	1,615	1,525	100·00	100·00	100·00	100·00	100·00	100·00

Proportion of Epidemic, Endemic, Systemic, and other diseases shown as percentages of Total Cases treated at Hospitals and Dispensaries.

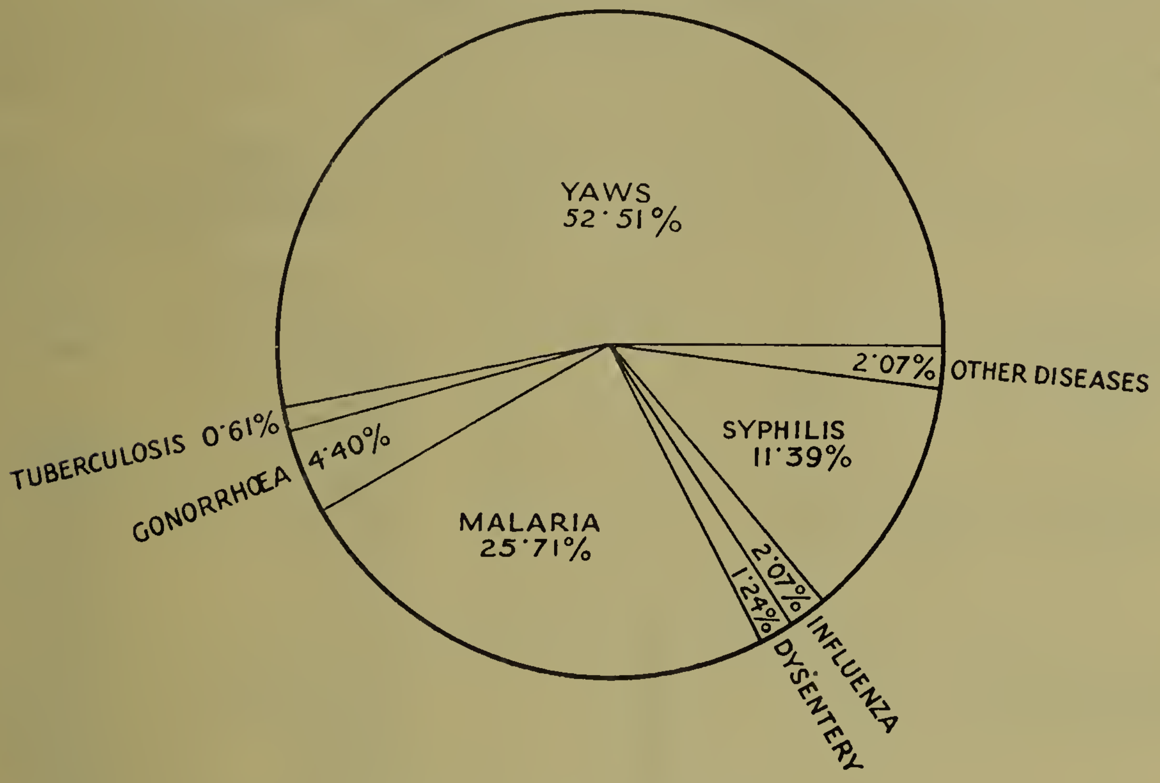


Total Incidence 428,593.

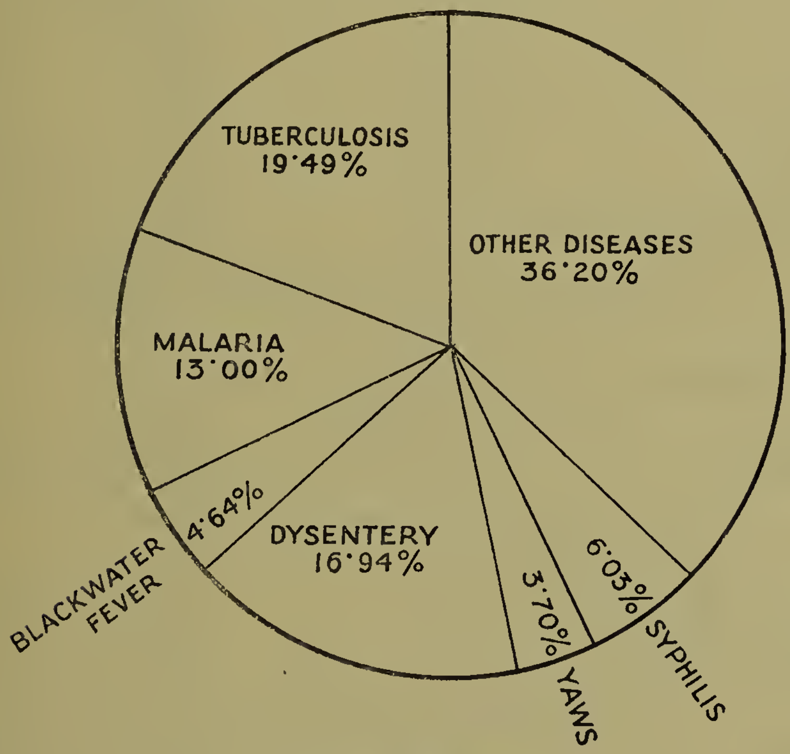


Total Deaths 1,525.

Proportion in percentages of Epidemic and Infectious Diseases, in- and out-patients, treated at Hospitals and Dispensaries.



Total Incidence 148,685.



Total Deaths 431.

(b) Vital Statistics.

(1) GENERAL NATIVE POPULATION.

The most recent estimate of the population of the Territory is computed at 4,740,726. No reliable statistics relating to Birth, Death and Infant Mortality rates are available at present.

(2) GENERAL EUROPEAN POPULATION.

Acknowledgment is made to the Registrar General of Births and Deaths for a return of the registered deaths, a total of sixty-one, which are summarised as follows:—

CAUSES OF DEATHS IN EUROPEANS DURING 1930.

(Classified according to the Manual of the International List of Causes of Deaths 1926).

I.—GENERAL DISEASES.

	Age	Nationality	Place of death
1. Typhoid fever	22 years	Norwegian	Moshi
2. Relapsing fever	45 ,,	Greek	Dar es Salaam
3. Malaria, cerebral	2 ,,	British	,,
4. ,, ,,	28 ,,	Greek	,,
5. ,, ,,	27 ,,	Hollander	Bukoba
6. ,, ,,	2 ,,	British	Arusha
7. ,, ,,	28 ,,	Greek	Manyoni
8. Malaria and heart failure	5 ,,	British	Dar es Salaam
9. ,, ,,	45 ,,	German	,,
10. ,, ,,	3 ,,	,,	Mikindani
11. ,,	68 ,,	British	Musoma
12. ,,	44 ,,	,,	Maswa
13. ,,	19 ,,	German	Morogoro
14. Dysentery Amœbic	42 ,,	Dutch (S.A.)	Arusha
15. Blackwater fever	38 ,,	Swiss	Mahenge
16. ,, ,,	29 ,,	German	Pangani
17. ,, ,,	30 ,,	British	Kwimba
18. ,, ,,	47 ,,	German	Kilosa
19. ,, ,,	25 ,,	Czecho-Slav.	Moshi
20. ,, ,,	30 ,,	German	Usambara
21. ,, ,,	45 ,,	Greek	Tabora
22. ,, ,,	35 ,,	French	Bagamoyo
23. ,, ,,	35 ,,	Swiss	Dar es Salaam
24. Tuberculosis of Lung	74 ,,	British	,,
25. ,, ,,	52 ,,	,,	Tabora
26. Tuberculosis larynx	61 ,,	Greek	Rufiji
27. General septicæmia	38 ,,	British	Dar es Salaam
28. ,, ,, with abscess of Lung	62 ,,	Greek	Moshi

II.—GENERAL DISEASES (NOT INCLUDED ABOVE).

29. Cancer	57 years	German	Mbulu

III.—DISEASES OF NERVOUS SYSTEM AND SENSE ORGANS.

30. Meningitis	14 months	British	Dar es Salaam
31. Cerebral thrombosis	57 years	French	Tabora
32. ,, hæmorrhage	45 ,,	British	Mbeya

IV.—DISEASES OF CIRCULATORY SYSTEM.

33. Valvular disease of heart (aortic valve disease)	70 years	British	Moshi
34. Disordered action of heart (auricular fibrillation)	69 ,,	Dutch	Kahama
35. Hæmorrhage, without stated cause	29 ,,	German	Tanga

V.—DISEASES OF RESPIRATORY SYSTEM.

36. Broncho-pneumonia	3 years	Dutch (S.A.)	Arusha
37. ,, ,,	36 ,,	British	Kilosa
38. Pneumonia lobar	27 ,,	German	Mbeya
39. ,, ,,	50 ,,	,,	Njombe

VI.—DISEASES OF THE DIGESTIVE SYSTEM.

40. Tonsillitis (suppurative)	8 years	British	Tanga
41. Hernia umbilical (intestinal obstruction)	60 ,,	Dutch (S.A.)	Arusha
42. Hepatic abscess	51 ,,	German	Rungwe
43. Liver disease (not specified)	65 ,,	American	Mbeya

VII.—NON-VENEREAL DISEASE OF URINO-GENITAL SYSTEM AND ANNEXA.

	Age	Nationality	Place of death
44. Acute nephritis	45 years	British	Kigoma

VIII.—THE PUERPERAL STATE.

45. Post-partum hæmorrhage	32 years	British	Dar es Salaam
46. ,, pyæmia	37 ,,	Dutch (S.A.)	Arusha
47. Accident of childbirth (cause not stated)	42 ,,	German	Usambara

XII.—DISEASES OF EARLY INFANCY.

48. Premature birth	3 hours	Swiss	Tanga

XIV.—EXTERNAL CAUSES.

49. Drowning (accidental)	26 years	British	Dar es Salaam
50. Injury by firearms (accidental)	28 ,,	,,	Usambara
51. Bodily injuries (lorry accident)	30 ,,	,,	Mbeya
52. Sunstroke	40 ,,	,,	,,
53. Fracture, femur and shock	60 ,,	Dutch (S.A.)	Arusha

ILL-DEFINED CAUSES.

54. Heart failure : cause not specified	30 years	German	Tanga
55. ,, ,,	46 ,,	,,	Tabora
56. ,, ,,	38 ,,	British	Mbeya
57. ,, ,,	78 ,,	German	Iringa
58. ,, ,,	32 ,,	,,	,,
59. ,, ,,	42 ,,	,,	Lindi
60. ,, ,,	17 ,,	French	Morogoro
61. Cause unknown	46 ,,	Dutch (S.A.)	Arusha

(3) EUROPEAN OFFICIALS.

Deaths.—There were five deaths among European officials, two being due to disease, three to accidents.

	1928	1929	1930
Pneumonia	1	—	—
Accident—killed while hunting	—	1	2
Enteric fever	1	—	—
Cardiac Syncope	1	—	—
Alcoholism (heart failure)	1	—	—
Brights disease	1	—	—
Suicide	1	1	—
Chronic nephritis	—	1	—
Septic tonsillitis	—	1	—
Chronic meningitis	—	1	—
Chronic malaria and heart failure	—	1	—
Accident—Railway	—	1	—
Accident—drowned while bathing	—	—	1
Cellulitis of face and general septicæmia	—	—	1
Tuberculosis (pulmonary)	—	—	1
TOTAL	6	7	5

Invalidings.—Eleven European officials invalided during the year as compared with five and six during the two preceding years.

	1928	1929	1930
Alcoholism	1	—	1
Tuberculosis (pulmonary)	1	1	1
Neurasthenia	1	2	2
Pyelitis	1	—	1
Rheumatoid arthritis	1	—	—
Heart disease	—	1	—
Ulcerated stomach	—	1	—
Uterine fibroids	—	1	—
Malignant tumour	—	—	*1
Gastro enteritis	—	—	1
General debility	—	—	1
Fracture of the left wrist	—	—	1
Gastric ulcer	—	—	1
Deafness	—	—	1
TOTAL	5	6	11

*Subsequently died in England—death not shown on page 15

(4) ASIATIC OFFICIALS.

Deaths.—There were five deaths among Asiatic officials, all due to disease.

	1928	1929	1930
Blackwater fever	4	4	3
Pneumonia	1	2	—
Pulmonary tuberculosis	1	—	—
Diabetes	1	—	—
Cellulitis	1	—	—
Broncho-pneumonia	—	1	—
Valvular disease of heart	—	1	—
Chronic malaria	—	1	—
Accident—motor car	—	2	—
Burns	—	1	—
Heart failure	—	—	1
Perinephritic abscess	—	—	1
TOTAL	8	12	5

Invalidings.—Eleven Asiatic officials were invalided during the year.

	1928	1929	1930
Pulmonary tuberculosis	3	—	2
Cerebral hæmorrhage	1	—	—
Chronic asthma	1	3	1
Chronic malaria	1	—	—
Acute anterior poliomyelitis	1	—	—
Neurasthenia	1	—	—
General debility and fistula	—	1	—
Valvular disease of heart	—	1	—
Chronic bronchitis	—	1	—
Trachoma, pannus and corneal ulceration	—	1	—
Myocardial degeneration	—	1	—
Delusions and hallucinations	—	1	—
Asthmatic bronchitis	—	2	2
Mental derangement	—	1	—
Defective vision	—	2	—
Cystitis and dysuria	—	1	—
General debility and premature senility	—	1	—
Diabetes	—	1	—
Epilepsy	—	1	1
Chronic anæmia and senile debility	—	1	—
Mild dementia	—	1	—
Chronic otitis media	—	—	1
Chronic rheumatism	—	—	1
Fracture of femur	—	—	1
Hemiplegia	—	—	1
Cerebral lesion	—	—	1
TOTAL	8	20	11

SICK, INVALIDINGS AND DEATH RATES, EUROPEAN OFFICIALS, 1928, 1929 AND 1930.

(For the three Principal Towns and the Whole Territory.)

	Dar es Salaam			Tabora			Tanga			Whole Territory		
	1928	1929	1930	1928	1929	1930	1928	1929	1930	1928	1929	1930
1. Total number of Officials resident ...	452	514	530	138	146	159	79	84	82	1,379	1,547	1,600
2. Average number resident...	309	332	359	80	83	79	70	76	82	851	942	1,007
3. Total number on sick list	358	371	432	62	38	65	66	75	75	756	779	915
4. Total number of days on sick list ...	2,616	2,854	3,303	420	225	528	491	444	521	5,407	5,520	6,475
5. Average daily number on sick list ...	7·17	7·82	9·05	1·15	0·62	1·45	1·35	1·22	1·43	14·81	15·12	17·74
6. Percentage of sick to average number resident	2·32	2·36	2·52	1·44	0·75	1·84	1·93	1·61	1·74	1·74	1·61	1·76
7. Average number of days on sick list for each patient	7·31	7·69	7·65	6·77	5·92	8·12	7·44	5·92	6·95	7·15	7·09	7·08
8. Average sick time to each resident ...	8·47	8·60	9·20	5·25	2·71	6·68	7·01	5·84	6·35	6·35	5·86	6·43
9. Total number invalided	5	5	9	—	—	—	—	—	2	5	6	11
10. Percentage of invalidings to total resident	1·11	0·97	1·70	—	—	—	—	—	2·44	0·36	0·38	0·69
11. Total deaths	2	4	2	2	2	1	—	—	—	6	7	5
12. Percentage of deaths to total resident ...	0·44	0·78	0·38	1·44	1·37	0·63	—	—	—	0·44	0·45	0·31
13. Percentage of deaths to average number resident	0·65	1·20	0·56	2·50	2·41	1·27	—	—	—	0·71	0·74	0·50
14. Number of cases of sickness contracted away from residence	—	—	—	—	1	—	—	—	—	41	22	15

Sick, Invalidings and Death Rates, Asiatic Officials, 1928, 1929 and 1930.
(For the three Principal Towns and the Whole Territory.)

	Dar es Salaam			Tabora			Tanga			Whole Territory		
	1928	1929	1930	1928	1929	1930	1928	1929	1930	1928	1929	1930
1. Total number of officials resident ...	848	888	1,000	328	254	385	110	149	172	*1,778	*1,838	*2,138
2. Average number resident...	742	735	828	200	193	185	95	125	172	*1,354	*1,390	*1,558
3. Total number on sick list	1,069	739	966	518	580	545	153	373	303	2,259	2,171	2,371
4. Total number of days on sick list ...	5,391	4,134	5,496	2,401	1,996	2,042	1,457	1,851	1,513	11,928	10,710	11,697
5. Average daily number on sick list ...	14·77	11·33	15·06	6·58	5·47	5·59	3·99	5·07	4·15	32·68	29·34	32·05
6. Percentage of sick to average number resident	1·99	1·54	1·82	3·29	2·83	3·02	4·20	4·06	2·41	2·41	2·11	2·06
7. Average number of days on sick list for each patient	5·04	5·59	5·69	4·64	3·44	3·75	9·52	4·96	4·99	5·28	4·93	4·93
8. Average sick time to each patient ...	7·27	5·62	6·64	12	10·34	11·04	15·34	14·81	8·80	8·81	7·71	7·51
9. Total number invalided	6	12	9	1	1	—	1	6	1	8	20	11
10. Percentage of invalidings to total resident	0·71	1·35	0·90	0·30	0·39	—	0·90	4·02	0·58	0·44	1·08	0·51
11. Total deaths	4	7	1	1	2	1	2	1	—	8	12	5
12. Percentage of deaths to total resident ...	0·47	0·78	0·10	0·30	0·78	0·26	1·82	0·67	—	0·44	0·65	0·23
13. Percentage of deaths to average number resident	0·54	0·95	0·12	0·50	1·03	0·54	2·11	0·80	—	0·59	0·86	0·32
14. Number of cases of sickness contracted away from residence	—	—	—	—	—	—	—	—	—	8	12	6

*Approximate only. Accurate figures not available.

Morbidity Rates for Malaria and Blackwater Fever amongst Officials—Dar es Salaam

	European Officials									Asiatic Officials								
	Total days off duty			Days off duty for Malaria			Days off duty for B.W. Fever			Total days off duty			Days off duty for Malaria			Days off duty for B.W. Fever		
	1928	1929	1930	1928	1929	1930	1928	1929	1930	1928	1929	19 0	1928	1929	1930	1928	1929	1930
January	213	281	315	82	48	64	—	—	—	421	547	554	254	265	177	26	—	—
February	217	174	356	58	35	68	—	—	17	283	275	400	164	154	143	6	—	—
March	215	140	275	65	—	57	—	16	28	224	283	480	126	72	180	8	—	5
April	127	215	430	29	26	149	—	27	—	232	386	515	143	192	261	—	—	22
May	230	233	443	38	61	169	—	—	—	614	500	535	400	95	274	8	—	37
June	311	258	197	96	60	75	—	—	—	804	262	428	542	78	142	—	5	9
July...	193	175	144	86	51	83	—	—	—	489	429	284	351	38	95	14	38	6
August	126	261	74	27	44	30	—	—	—	549	308	309	178	59	82	—	—	—
September	221	246	254	43	16	62	—	—	—	502	246	409	258	40	159	—	—	—
October	228	232	231	38	6	62	—	—	—	453	280	702	219	53	234	—	—	—
November	265	274	348	25	15	75	—	—	—	537	348	528	267	31	266	—	—	—
December	270	365	236	36	64	80	—	—	—	483	270	352	204	13	223	—	—	—
TOTALS	2,616	2,854	3,303	623	426	974	—	43	45	5,391	4,134	5,496	3,106	1,090	2,236	62	43	79

Percentage of days off duty for Malaria and Blackwater Fever to total days off duty—

1928	23·81
1929	16·43
1930	30·85

Percentage of days off duty for Malaria and Blackwater Fever to total days off duty—

1928	58·76
1929	27·41
1930	42·12

MORBIDITY RATES FOR MALARIA AND BLACKWATER FEVER AMONGST OFFICIALS—TANGA.

	EUROPEAN OFFICIALS									ASIATIC OFFICIALS								
	Total days off duty			Days off duty for Malaria			Days off duty for B.W. Fever			Total days off duty			Days off duty for Malaria			Days off duty for B.W. Fever		
	1928	1929	1930	1928	1929	1930	1928	1929	1930	1928	1929	1930	1928	1929	1930	1928	1929	1930
January	45	29	33	—	15	6	—	—	—	180	194	96	60	86	17	—	—	—
February	35	31	29	—	4	15	—	—	—	136	131	114	23	58	33	—	10	—
March	35	27	58	6	—	11	—	—	—	131	61	170	12	5	51	—	6	—
April	83	39	74	14	8	23	—	—	—	129	129	186	32	5	90	—	—	—
May	65	49	67	12	1	15	—	—	—	90	161	161	31	50	55	—	—	—
June	34	58	59	5	31	17	—	—	—	55	150	97	37	66	27	—	—	—
July	20	47	61	4	4	—	—	—	—	115	241	134	52	105	32	—	9	—
August	28	27	23	12	6	12	—	—	—	160	217	127	52	105	32	3	31	—
September	38	32	29	5	14	5	—	—	—	162	171	100	44	70	8	1	8	—
October	44	17	27	12	3	5	—	—	—	101	142	54	42	55	2	3	—	—
November	35	64	40	6	19	—	—	—	—	91	174	148	41	43	40	—	—	—
December	31	24	21	6	7	10	—	—	—	107	80	126	22	34	38	—	—	—
TOTALS	491	444	521	82	112	119	—	—	—	1,457	1,851	1,513	448	682	425	7	64	—

Percentage of days off duty for Malaria and Blackwater Fever to total days off duty—
1928 ... ... 16·70
1929 ... ... 25·22
1930 ... ... 22·84

Percentage of days off duty for Malaria and Blackwater Fever to total days off duty—
1928 ... ... 31·23
1929 ... ... 40·30
1930 ... ... 28·09

MORBIDITY RATES FOR MALARIA AND BLACKWATER FEVER AMONGST OFFICIALS—TABORA.

	EUROPEAN OFFICIALS									ASIATIC OFFICIALS								
	Total days off duty			Days off duty for Malaria			Days off duty for B.W. Fever			Total days off duty			Days off duty for Malaria			Days off duty for B.W. Fever		
	1928	1929	1930	1928	1929	1930	1928	1929	1930	1928	1929	1930	1928	1929	1930	1928	1929	1930
January	17	3	85	—	—	9	—	—	—	226	209	191	57	114	92	—	—	19
February	29	31	48	18	1	6	—	—	—	189	268	176	106	170	83	—	13	24
March	110	44	59	18	3	10	—	—	—	143	178	164	42	89	143	32	6	—
April	71	17	56	33	—	19	—	—	—	169	130	140	100	58	98	22	—	10
May	64	32	83	38	5	11	—	—	—	133	140	208	51	64	71	11	7	76
June	25	18	49	13	11	5	—	—	—	293	216	147	200	86	72	55	21	40
July	21	2	41	—	—	3	—	—	—	245	107	202	151	56	65	23	—	55
August	9	—	18	2	—	18	—	—	—	204	132	116	87	45	33	16	—	17
September	13	17	25	3	—	—	—	—	—	198	144	146	62	33	32	—	—	—
October	17	24	15	7	9	—	—	—	—	238	114	247	85	45	77	—	—	—
November	32	14	34	8	—	—	—	—	—	198	172	161	65	74	42	—	—	14
December	12	23	15	3	—	2	—	—	—	165	186	144	59	60	53	—	—	20
TOTALS	420	225	528	143	29	83	—	—	—	2,401	1,996	2,042	1,065	894	861	159	47	275

Percentage of days off duty for Malaria and Blackwater Fever to total days off duty—

1928	34·05
1929	12·88
1930	15·72

Percentage of days off duty for Malaria and Blackwater Fever to total days off duty—

1928	50·98
1929	47·14
1930	55·63

(5) THE SOUTHERN BRIGADE HEADQUARTERS, KING'S AFRICAN RIFLES.

Unit	1930 Month	Station	Effective Strength each month	Average daily number of sick		Deaths	Invalidings
				In hospital	In lines		
2nd Battn. K.A.R.	January ...	Tabora	426	2·30	4·50	—	2
6th ,,		Dar es Salaam ...	485	1·46	·38	—	1
,, ,,		Arusha	162	·76	2·54	—	1
,, ,,		Mahenge ...	99	3·75	1·56	—	—
Brigade Signal Sec.	February	Dar es Salaam ...	34	·70	·10	—	—
2nd Battn. K.A.R.		Tabora	382	3·20	5·60	1 (a)	—
6th ,,		Dar es Salaam ...	425	2·75	1·31	1 (b)	2
,, ,,		Arusha	165	3·90	1·53	—	—
,, ,,		Mahenge ...	98	1·14	1·42	—	—
Brigade Signal Sec.	March ...	Dar es Salaam ...	51	—	·40	—	—
2nd Battn. K.A.R.		Tabora	385	4·20	8·70	—	—
6th ,,		Dar es Salaam ...	393	3·94	1·34	—	—
,, ,,		Arusha	164	3·78	1·51	—	—
,, ,,		Mahenge ...	84	—	1·84	—	—
Brigade Signal Sec.	April ...	Dar es Salaam ...	51	1·30	·30	1 (c)	—
2nd Battn. K.A.R.		Tabora	383	3·60	7·30	—	—
6th ,,		Dar es Salaam ...	392	2·30	·76	—	1
,, ,,		Arusha	160	1·44	2·19	1 (d)	—
,, ,,		Mahenge ...	85	1·05	1·41	—	—
Brigade Signal Sec.	May ...	Dar es Salaam ...	51	·80	2·30	—	—
2nd Battn. K.A.R.		Tabora	376	3·50	7·40	1 (e)	—
6th ,,		Dar es Salaam ...	378	3·77	3·36	—	—
,, ,,		Arusha	162	2·48	4·59	—	—
,, ,,		Mahenge ...	87	·71	1·42	—	—
Brigade Signal Sec.	June ...	Dar es Salaam ...	60	4·10	1·40	1 (f)	—
2nd Battn. K.A.R.		Tabora	303	2·80	5·20	1 (g)	—
6th ,,		Dar es Salaam ...	334	2·57	2·24	1 (h)	—
,, ,,		Arusha	164	·73	2·01	—	—
,, ,,		Mahenge ...	89	1·34	·33	—	—
Brigade Signal Sec.	July ...	Dar es Salaam ...	63	2·10	1·80	—	—
2nd Battn. K.A.R.		Tabora	294	2·70	5·30	—	—
6th ,,		Dar es Salaam ...	293	2.65	2·53	—	2
,, ,,		Arusha	161	1·54	·77	—	—
,, ,,		Mahenge ...	100	—	·31	—	1
Brigade Signal Sec.	August ...	Dar es Salaam ...	69	1·00	1·90	—	—
2nd Battn. K.A.R.		Tabora	301	2·30	4·40	—	—
6th ,,		Dar es Salaam ...	57	12·50	5·41	—	1
,, ,,		Sadani	248	—	—	—	—
,, ,,		Arusha	162	·95	4·57	—	—
,, ,,		Mahenge ...	89	·34	·69	—	—
Brigade Signal Sec.	September	Dar es Salaam ...	70	2·10	3·80	—	—
2nd Battn. K.A.R.		Tabora	320	4·90	5·60	—	—
6th ,,		Dar es Salaam ...	308	·58	1·85	—	—
,, ,,		Arusha	154	·58	4·09	—	—
,, ,,		Mahenge ...	84	5·35	·21	1 (i)	—
Brigade Signal Sec.	October ...	Dar es Salaam ...	71	2·10	2·50	—	—
2nd Battn. K.A.R.		Tabora	317	3·80	6·50	1 (j)	—
6th ,,		Dar es Salaam ...	303	3·06	1·94	—	6
,, ,,		Arusha	155	5·40	5·40	—	—
,, ,,		Mahenge ...	83	1·12	·37	—	—
Brigade Signal Sec.	November	Dar es Salaam ...	72	1·50	1·90	—	1
2nd Battn. K.A.R.		Tabora	308	3·70	7·90	—	—
6th ,,		Dar es Salaam ...	306	1·66	1·27	—	—
,, ,,		Arusha	149	5·83	4·83	—	—
,, ,,		Mahenge ...	80	1·87	·37	—	—
Brigade Signal Sec.	December	Dar es Salaam ...	71	·70	1·40	—	—
2nd Battn. K.A.R.		Tabora	372	3·30	5·80	—	—
6th ,,		Dar es Salaam ...	304	1·73	3·97	1 (k)	—
,, ,,		Arusha	149	5·83	4·83	—	—
,, ,,		Mahenge ...	76	·81	·40	—	—

(a) Askari died *en route* to Nyasaland. (b) Askari—bacillary, dysentery. (c) Daughter of No. 10835 Sig. Mangani—Fever. (d) Askari—pneumonia. (e) Askari—Acute gastro enteritis. (f) Wife of No. 3335 Sig. Swedi—Pulmonary embolism. (g) Askari died at Darala (Draft "A"). (h) Askari—Motor accident. (i) Askari—pneumonia. (j) Askari—killed by lion. (k) Askari—suppurative paratitis and septicæmia.

SECTION III.—HYGIENE AND SANITATION.

(a) General Measures of Sanitation.

A short summary has already been given under the heading "Public Health". The most important sanitary event of the year was the commencement of the survey of the Dar es Salaam drainage and sewerage scheme by Messrs. Howard Humphreys and Sons, the Consulting Engineers.

The survey was started in July, 1930, and had not been completed by the end of the year. When their report is received it is hoped that, in spite of the economic crisis, money can be made available to commence the work which is urgently required. The present system of cesspits, the contents of which are pumped into tanks and emptied into the inner harbour, cannot continue indefinitely.

Considerable progress was made during the year by the Public Works Department in improving the water supplies in several townships. At Dar es Salaam three additional boreholes were provided and one steel storage tank of a capacity of 40,000 gallons was erected to complete the storage units.

At Tanga boreholes are being developed at depths between 100 and 200 feet, delivery being made to a storage tank of 28,000 gallons capacity at a height of approximately 140 feet.

Improvements were made to the existing water supplies at Bukoba, Dodoma, Mpwapwa, Morogoro and Lindi while schemes have been prepared and in some cases materials ordered to provide supplies at Mwanza, Iringa, Moshi, Arusha, Kigoma, Tabora, Kilwa and Shinyanga.

School Hygiene. The regular inspection of school children was continued, where Maternity and Child Welfare Clinics have been established this work is carried out by the Health Visitors.

Labour Conditions. With the exception of the abnormal sick rate in the central area of the Territory which is referred to below the general health of the labourers was decidedly good and considerable improvement in housing, food and sanitation is reported from most of the estates. The universal economic depression particularly in the sisal industry must result in progress being stopped until conditions improve. Plantations which are producing at a loss and whose funds are barely sufficient for the most urgent necessities cannot be expected to continue expenditure on permanent housing and other improvements and amenities.

The abnormal sick rate mentioned above was due to the immigration of large numbers of natives from the north-west of the Territory and from the neighbouring portion of the Belgian Mandated Territory. A serious food shortage was present in these areas and the natives who emigrated in search of work were debilitated and under-nourished. Those who found employment were faced with unfamiliar conditions. Regular daily work accompanied by a diet which, although good and adequate, differed entirely from that used in their native villages was sufficient to break down their already weakened resistance and many fell sick. The Labour Department were fortunately able to deal with the situation promptly. The sick were treated in Government hospitals and on the estates and arrangements made for repatriation. The food position in the north-western areas had been remedied and by the middle of the year the great bulk of the unfit men had either been repatriated or, as a result of medical treatment, were able to earn their living at agricultural work.

Housing and Town Planning. Seven meetings of the Central Town Planning and Building Committee were held during the year. A large number of sites for Government and non-Government buildings in the different townships were approved. The zoning of the Township of Tanga into residential, commercial and native areas was completed and approved and considerable progress was made in connection with the layout of other townships. The appointment, towards the end of the year, of a Municipal Secretary for Dar es Salaam who will also act as Secretary to the Central Town Planning and Building Committee in the place of the Deputy Director of Sanitary Service will relieve that officer of considerable correspondence.

Food in relation to Health and Disease. The food shortage in the north-western areas which was present during 1929 had been remedied early in the year. Abnormal rainfall and consequent flooding was responsible for considerable destruction of native cultivation. The damage however was local and conditions generally were satisfactory.

Traffic in Opium and other Dangerous Drugs. This traffic is completely controlled by the Dangerous Drugs Ordinance and rules made under it. No cases of drug-taking were brought before the courts during the year.

(b) Measures taken to Spread the Knowledge of Hygiene and Sanitation.

Personal hygiene and sanitation form part of the curriculum in all schools while the Native Sanitary Inspectors continue to teach the rural communities. Articles on sanitation and on the cause and prevention of common diseases are published from time to time in the native paper published by the Government which has a very wide circulation.

(c) Training of Sanitary Personnel.

Refresher courses for those Native Sanitary Inspectors who were approaching their "efficiency bar" were held at the Health Office at Mwanza. The examination held after the courses were completed was a stiff one and of the forty-six candidates who sat twenty-six satisfied the examiners and became eligible to enter Grade IV of the African Civil Service.

(d) Recommendations for future Work.

The urgent need for economy makes it impossible to advocate any extension of the activities of the Medical Department.

As already stated in the body of this report it is hoped that it will be possible to find funds to start the Dar es Salaam drainage and sewerage scheme when the report of the consulting engineers has been received and considered.

For reasons of economy the following Reports have not been printed:—

Report of the Medical Officer of Health for Dar es Salaam;

Report of the Port Health Officer and Medical Officer in charge of the Infectious Diseases Hospital, Dar es Salaam;

Report on Maternity and Child Welfare Work in Dar es Salaam;

Report of the Medical Officer of Health for Tanga.

TABLE SHOWING INCIDENCE OF TUBERCULOSIS AT THE VARIOUS STATIONS IN THE TERRITORY DURING 1928, 1929 AND 1930.

Station	1928				1929				1930			
	Pulmonary		All other forms		Pulmonary		All other forms		Pulmonary		All other forms	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
Arusha	35	2	8	1	36	8	14	—	13	3	29	2
Bagamoyo	7	—	2	—	11	—	1	—	8	2	—	—
,, District work	—	—	—	—	—	—	—	—	—	—	3	—
Biharamulo	—	—	—	—	2	1	—	—	1	—	—	—
Bukoba	2	2	5	—	1	—	6	—	4	—	18	1
Dar es Salaam:												
European Hospital	11	2	—	—	7	—	—	—	6	1	—	—
Sewa Hadji Hospital	33	1	12	1	29	3	1	—	24	1	5	1
Health Office *	44	—	—	—	20	—	—	—	—	16	—	—
Private Practitioners *	8	—	—	—	8	—	—	—	5	—	—	—
Dodoma	12	—	2	—	8	4	15	3	9	2	2	1
Handeni	—	—	6	—	2	—	1	—	29	—	8	—
Iringa	6	5	6	2	2	—	7	2	7	3	4	1
Kahama	3	1	—	—	3	—	2	2	6	3	1	1
Kasanga	—	—	—	—	—	—	—	—	—	—	—	—
Kasulo	—	—	3	—	—	—	—	—	1	—	1	1
Kibata	1	—	2	—	—	—	—	—	—	—	—	—
Kibaya	—	—	2	—	1	—	—	—	—	—	8	—
Kibondo	1	—	—	—	7	2	2	—	1	1	1	1
,, District work *	—	—	—	—	—	—	—	—	—	—	4	—
Kigoma	3	—	2	—	3	—	3	—	4	2	2	—
Kilosa	5	2	1	—	7	3	3	—	5	2	1	—
Kilwa	3	—	2	—	16	—	6	—	17	1	6	1
Kisaki	—	—	1	—	—	—	—	—	—	—	—	—
Kondoa	6	1	1	1	10	2	10	—	—	—	7	—
Lindi	5	1	—	—	7	1	2	1	3	3	4	2
Lushoto	4	3	4	—	2	—	—	—	6	2	1	—
Mafia	—	—	1	—	4	—	—	—	2	—	—	—
Mahenge	3	—	2	—	3	1	1	—	7	1	—	—
,, District work *	—	—	—	—	—	—	—	—	2	—	—	—
Malangali	—	—	—	—	—	—	—	—	—	—	—	—
Manyoni	—	—	—	—	—	—	—	—	3	1	—	—
Mbeya	4	1	2	—	2	—	1	—	1	—	—	—
Mbulu	2	—	—	—	7	1	1	1	2	2	3	—
Mikindani	2	—	—	—	8	—	4	1	3	1	—	—
Mkalama	1	—	1	—	4	—	10	—	1	—	13	—
Morogoro	19	5	1	—	10	4	—	—	3	—	—	—
Moshi...	14	5	4	1	55	4	3	—	57	2	12	1
,, Kibongoto	70	6	36	—	63	8	74	—	57	5	51	1
,, District work *	406	—	206	—	261	—	43	—	133	—	49	—
Mpwapwa	—	—	—	—	—	—	—	—	2	1	—	—
Musoma	2	—	6	—	7	—	5	1	11	1	9	—
Mwanza	16	3	7	—	13	2	8	—	36	4	7	1
Mwaya	—	—	2	—	1	—	—	—	—	—	—	—
Nzega	7	1	6	1	15	1	3	—	8	2	2	—
Pangani	13	6	3	—	13	4	8	2	17	2	4	1
Shinyanga	2	1	—	—	4	1	13	—	4	2	1	—
Singida	3	2	6	1	3	—	1	—	—	—	—	—
Songea	9	2	13	—	2	—	9	—	4	—	15	—
Sumbawanga	6	—	1	—	—	—	1	—	6	—	1	—
Tabora	19	10	2	—	15	5	4	—	12	5	9	3
Tanga	150	51	9	—	101	47	4	—	46	8	11	—
Tukuyu	3	—	1	—	11	1	—	—	10	1	—	—
Tunduru	—	—	—	—	1	—	4	—	2	—	13	—
Ujiji	3	—	4	—	2	2	—	—	—	—	—	—
Usanji	—	—	—	—	—	—	—	—	88	1	93	—
Utete	2	1	—	—	2	—	1	—	—	—	1	—
Kahama Maternity and Child Welfare Centres	35	1	6	—	6	—	3	—	2	—	—	—
Total	984	117	378	8	795	105	274	13	684	65	399	19
Miscellaneous Dispensaries, Missions, etc.	—	—	—	—	15	2	—	—	7	—	9	—
Grand Total	984	117	378	8	810	107	274	13	691	65	408	19

*Not included in Tables V and VI.

SECTION VII.—PRISONS AND ASYLUMS.—Report on the Health of Prisoners for 1930.

	1	2	3	4	5	6	7	8	9				10	
Name of Prison	Number of prisoners in prison on 31st Dec., 1929	Number of prisoners committed to prison during 1930	Number of prisoners in prison on 31st Dec., 1930	Daily average number of prisoners, 1930	Number admitted to prison sick bay during 1930	Number admitted to Government hospitals, 1930	Daily average on sick list	Number of deaths of prisoners	(a) Cause of death in each case	(b) Period of detention in prison prior to date of death			(a) Prisoners released on medical grounds	(b) Cause of release in each case
										Y.	M.	D.		
Arusha	90	335	113	93·9	10	3	2·2	Nil	—	—	—	—	Nil	
Bagamoyo ...	13	76	15	13·0	Nil	Nil	—	Nil	—	—	—	—	Nil	—
Biharamulo ...	12	49	29	20·3	Nil	8	2·2	1	Heart failure	—	5	—	Nil	—
Bukoba ...	63	465	86	78·8	48	28	4·9	Nil	—	—	—	—	Nil	—
Dar es Salaam ...	215	1007	261	222·5	—	162	3·5	6	(1) Lobar pneumonia	1	0	8	Nil	—
									(2) Arterio sclerosis	—	4	—		—
									(3) Ankylostomiasis & malaria	—	3	—		
									(4) Lobar pneumonia	—	9	—		
									(5) Pulmonary tuberculosis	1	10	—		
									(6) Lobar pneumonia	—	3	—		
Dodoma ...	114	305	109	118·1	Nil	110	2·9	2	(1) Malaria and pneumonia	1	9	17	Nil	
									(2) Chronic gonorrhoea with exhaustion	—	2	13		—
Iringa	42	168	52	44·4	Nil	Nil	0·2	Nil	—	—	—	—	Nil	—
Kahama ...	10	73	28	17·5	12	Nil	0·2	Nil	—	—	—	—	Nil	—
Kasulu	5	65	7	17·0	Nil	2	0·7	Nil	—	—	—	—	Nil	—
Kibondo ...	4	60	5	11·6	—	1	1·3	1	Pneumonia	—	—	18	Nil	—
Kigoma... ...	33	210	85	57·6	—	1	2·0	1	Pneumonia	—	3	18	Nil	—
Kilwa	26	201	9	22·0	Nil	5	0·5	Nil	—	—	—	—	Nil	—
Kondoa... ...	19	162	26	27·0	1	1	0·4	1	Gastric ulcer	—	1	—	Nil	—
Lindi	77	428	74	73·9	32	24	0·1	Nil	—	—	—	—	Nil	—
Lushoto... ...	27	76	32	33·4	2	—	0·8	Nil	—	—	—	—	Mil	—
Mafia	14	57	7	10·1	—	2	—	Nil	—	—	—	—	Nil	—
Mahenge ...	6	56	4	7·1	—	3	0·3	Nil	—	—	—	—	Nil	—
Manyoni ...	9	213	18	10·5	34	—	0·2	Nil	—	—	—	—	Nil	—
Mbeya	13	132	18	7·5	—	1	—	Nil	—	—	—	—	Nil	—
Mbulu	18	176	30	16·5	—	17	0·4	Nil	—	—	—	—	Nil	—
Mikindani ...	7	111	6	10·5	—	—	—	Nil	—	—	—	—	Nil	—
Mkalama ...	11	116	6	10·0	—	1	1·7	Nil	—	—	—	—	Nil	—
Morogoro ...	117	619	179	132·7	133	—	7·6	3	(1) Amoebic dysentery	—	7	—	Nil	—
									(2) Malaria and pneumonia	—	1	—	Nil	—
									(3) Amoebic dysentery	—	2	—	Nil	—
Moshi	62	442	64	67·9	7	—	3·0	Nil	—	—	—	—	Nil	—
Musoma ...	37	525	68	63·7	—	6	4·0	1	Amoebic dysentery	—	—	7	Nil	—
Mwanza... ...	143	533	260	188·8	27	3	1·2	4	(1) Ankylostomiasis	5	3	8	Nil	—
									(2) ditto	—	6	18	Nil	—
									(3) Malaria nephritis uraemia	—	11	10	Nil	—
									(4) Cerebral malaria	—	9	—	Nil	—

REPORT ON THE HEALTH OF PRISONERS FOR 1930.—*continued.*

Name of Prison	1	2	3	4	5	6	7	8	9				10	
	Number of prisoners in prison on 31st Dec., 1929	Number of prisoners committed to prison during 1930	Number of prisoners in prison on 31st Dec., 1930	Daily average number of prisoners, 1930	Number admitted to prison sick bay during 1930	Number admitted to Government hospitals, 1930	Daily average on sick list	Number of deaths of prisoners	(*a*) Cause of death in each case	(*b*) Period of detention in prison prior to date of death			(*a*) Prisoners released on medical grounds	(*b*) Cause of release in each case
										Y.	M.	D		
Nzega	35	152	28	22·0	—	—	—	Nii	—	—	—	—	Nil	—
Pangani... ...	11	95	8	7·9	2	—	1·2	1	Lobar pneumonia	—	—	—	Nil	—
Shinyanga ...	19	178	25	25·0	1	6	0·7	Nil	—	—	—	—	Nil	—
Singida	26	110	26	19·7	—	4	0·1	Nil	—	—	—	—	Nil	—
Songea	13	130	21	18·8	—	11	1·2	3	(1) Schistosomiasis	—	2	24	Nil	—
									(2) ditto	—	1	17		
									(3) Gastric ulcer	—	—	10		
Sumbawanga ...	11	31	21	6·7	1	2	0·2	1	Vesico-rectal fistula and hernia	—	3	—	Nil	—
Tabora	257	372	291	280·0	136	27	4·0	12	(1) Bacillary dysentery	2	—	—	Nil	—
									(2) Syphilis cerebral thrombosis	1	9	—		
									(3) Malaria Sub-tertian	1	6	—		
									(4) Lobar pneumonia	—	1	15		
									(5) Cerebro-spinal meningitis	—	1	—		
									(6) Pulmonary tuberculosis	—	1	15		
									(7) General debility	—	1	—		
									(8) Acute enteritis	—	4	—		
									(9) Cerebro-spinal meningitis	8	5	—		
									(10) Lobar pneumonia	—	—	2		
									(11) Urinary fistula	—	—	24		
									(12) Ankylostomiasis	1	11	15		
Tanga	187	644	235	204·8	155	23	4·8	5	(1) Pulmonary tuberculosis	—	—	25	Nil	—
									(2) ditto	1	9	—		
									(3) Chronic tuberculosis peritonitis	—	2	—		
									(4) Lobar pneumonia	2	6	—		
									(5) ditto	—	7	24		
Tukuyu... ...	93	265	84	74·1	48	12	1·2	6	(1) Phthisis	—	10	—	Nil	—
									(2) Meningitis	—	—	20		
									(3) Lobar pneumonia	—	7	—		
									(4) ditto	—	2	—		
									(5) ditto	—	7	11		
									(6) ditto	—	2	—		
Tunduru ...	—	17	—	0·1	—	—	0·1	Nil	—	—	—	—	Nil	—
Utete	10	108	9	9·2	1	1	—	Nil	—	—	—	—	Nil	—

REPORT ON THE HEALTH OF PRISONERS FOR 1930—*continued.*

Name of Prison	11 System of confinement: Association Cells (A.C.). Single Cells (S.C.).	12 Cubic space available at night per prisoner taking average number of prisoners.	13 Floor space in square feet per prisoner taking average number of prisoners	14 Labour on which prisoners are employed and hours of work.	15 Sanitary condition of prison.	16 Are all cells cemented ?	17 Prevailing diseases.	18 Rules as to diet and hours of meals. What variety is provided: green food ? meat ?
		Cubic feet	Square feet					
Arusha	A.C.	500	40	Wood cutting, mending roads, sanitary work in gaol, water carrying. *Hours:* Week-days 6.30 a.m. to 4 p.m., Saturdays 6.30 a.m. to 12 noon. Sundays free. Break of one hour for meal time at mid-day on working days.	Excellent	Yes	Bronchitis, gastro-intestinal affections, roundworm and tapeworm, and minor injuries	According to Prison Ordinances
Bagamoyo ...	A.C.	2,690	368	Road repairs, sanitation work, cutting grass, cutting firewood and drawing water for prison. *Hours:*— 6.30 a.m. to 12 noon and 1 p.m. to 4 p.m.	Good	Yes	Nil	Three times a day: 6 a.m., 12 noon and 5.30 p.m. (1) Maize, beans, ghee and lemons to natives. (2) Rice, wheat, potatoes to Indians and Arabs. (3) Daily meat and fish to long term native prisoners and three times a week to Indians and Arabs
Biharamulo ...	A.C.	300	80	Water carrying, wood cutting	Fair, new gaol in course of construction	Yes	Malaria, abdominal complaints and bronchitis	Porridge in morning. Bananas at 12.30 noon and 5.30 p.m. Diet provided as per scale
Bukoba ...	Both types	450	68	Various work. Eight hours	Good	Yes	Malaria, bronchitis, influenza and pneumonia	Maize, cassava, beans, ghee, meat and bananas. Meals: 7 a.m., 12 noon and 5 p.m.
Dar es Salaam ...	A.C. and S.C.	7,147	66	Tailoring, carpentry, mat-making, dockyard, road-mending, etc. *Hours:*—6.30 a.m. to 12 noon and 1 p.m. to 4.30 p.m.	Good	Yes	Venereal, respiratory and intestinal	As laid down in Government Notice No. 118 of 1921

REPORT ON THE HEALTH OF PRISONERS FOR 1930—*continued.*

Name of Prison	11 System of confinement: Association Cells (A.C.). Single Cells (S.C.).	12 Cubic space available at night per prisoner taking average number of prisoners.	13 Floor space in square feet per prisoner taking average number of prisoners	14 Labour on which prisoners are employed and hours of work.	15 Sanitary condition of prison.	16 Are all cells cemented ?	17 Prevailing diseases.	18 Rules as to diet and hours of meals. What variety is provided : green food ? meat ?
		cubic feet	square feet					
Dodoma ...	A.C.	447	28	Brick-making, masonry, rope-making, water carrying, quarrying and agricultural work, general station and township improvements. *Hours* :— 7 a.m. to 12 noon and 1 p.m. to 4 p.m.	Very good	Yes	Diarrhoea, dysentery, bronchitis, malaria, lumbago and venereal diseases.	Morning gruel 6.30 a.m.; mid-day meal, 12 noon; evening meal, 5.30 p.m. Prisoners are dieted by scale laid down *vide* Government Notice No. 177 of 1924. Sick prisoners receive such diet as prescribed by the medical authorities.
Iringa	A.C.	680	40	Cutting wood, repairing roads, gardening, carrying water, general sanitary work and station improvements. *Hours* : 7 a.m. to 12 noon and 1 p.m. to 4 p.m.	Good	Yes	Bronchitis and constipation	Prisoners are rationed in accordance with Prison Ordinance. Meal hours are 6 a.m., 12 noon and 3 p.m.
Kahama ...	A.C.	642	49·2	Mending roads, wood cutting and water carrying for the gaol and sanitary work in and around the gaol. *Hours* :— Week-days 6.30 a.m. to 12 noon, and 1 p.m. to 4 p.m. Saturdays 6.30 a.m. to 12 noon. Sundays no work.	Good	No	Relapsing fever, malaria, ankylostomiasis, bronchitis, diarrhœa and minor injuries.	Meals twice a day : 12 noon and 5 p.m. Maize, beans, cassava flour, maize flour and salt.
Kasulu	A.C.	1,607	950	Grass cutting, collecting firewood and carrying water for gaol. From 8 to 12 a.m. and 2 p.m. to 4 p.m.	Good	Yes	Nil	Local grains ground into meal with native vegetables in season.
Kibondo ...	A.C.	255·59	27·12	Cutting grass from Government premises and minor repairs to Government buildings, etc. From 8 a.m. to 12 a.m. and 2 p.m. to 4 p.m.	Satisfactory	Yes	Nil	Beans, millet, etc.

REPORT ON THE HEALTH OF PRISONERS FOR 1930—*continued.*

Name of Prison	11 System of confinement: Association Cells (A.C.). Single Cells (S.C.).	12 Cubic space available at night per prisoner taking average number of prisoners.	13 Floor space in square feet per prisoner taking average number of prisoners.	14 Labour on which prisoners are employed and hours of work.	15 Sanitary condition of prison.	16 Are all cells cemented ?	17 Prevailing diseases.	18 Rules as to diet and hours of meals. What variety is provided: green food ? meat ?
		cubic feet	square feet					
Kigoma... ...	A.C.	356	140	Quarries, building roads, cutting firewood, etc.	Good	Yes	Malaria, ankylostomiasis, minor respiratory diseases and digestive, etc.	Standard long and short term diets. Meals: 12 noon and 5.15 p.m.
Kilwa	A.C.	1,150	140·2	Water carrying, brick-making and township work.	Good	Yes	Nil	According to the Prison Ordinance. Meals: 12 noon and 4.30 p.m.
Kondoa... ...	A.C.	482·2	48·2	General public work, *i.e.* township roads, grass, upkeep of prison. *Hours*:—6.30 a.m. to 12 noon and 1 p.m. to 4 p.m.	Good	Yes	Bronchitis, fevers, minor injuries, etc.	Ghee, maize, salt, beans, millet, etc.
Lindi	A.C.	500	50	Stone-breaking, road-making and general work. *Hours*:-7 a.m. to 12 noon and 1 p.m. to 4 p.m.	Good	Yes	Yaws, venereal disease, malaria, ankylostomiasis, respiratory, digestive etc.	Meals: 6 a.m., porridge; noon, grain, vegetables and ghee; 5 p.m. fish, grain and fruits
Lushoto... ...	A.C.	454	52·8	Cultivating prison shamba, wood cutting. *Hours*:—7 a.m. to 12 noon and 1 p.m. to 4 p.m.	Good	Yes	Coryza, bronchitis and minor injuries	Diet as per regulations. Green food and potatoes provided
Mafia	A.C. and S.C.	1,374	119	Wood cutting, mending roads, helping sanitation, working at the pumping station and carrying water. *Hours*:- Week-days 6 a.m. to 12 noon, and 1 p.m. to 4 p.m. Saturdays 6.30 a.m. to 12 noon. No work on Sundays.	Good	Yes	Injuries and ulcers of various kinds	As per prison regulations: 2 lbs. mealie meal, 5 oz. beans, 1 oz. ghee and 3 oz. salt per day. Lemons twice a week when available. Food given 12 to 1 p.m. and 4 to 5 p.m.

Name of Prison	11 System of confinement: Association Cells (A.C.). Single Cells (S.C.).	12 Cubic space available at night per prisoner taking average number of prisoners.	13 Floor space in square feet per prisoner taking average number of prisoners	14 Labour on which prisoners are employed and hours of work.	15 Sanitary condition of prison.	16 Are all cells cemented ?	17 Prevailing diseases.	18 Rules as to diet and hours of meals. What variety is provided : green food ? meat ?
		cubic feet	square feet					
Mahenge ...	A.C.	640	64	Cultivating prison farm, cutting and carrying firewood, drawing water, and cleaning police lines daily. *Hours* :– 6 a.m. to 12 noon and 1 p.m to 4 p.m.	Satisfactory	No; beaten lime and sand	Yaws, malaria, bronchitis, constipation, scabies and minor injuries	Meals according to dietary scale, at 12 noon and 5 p.m. Meat and fish supp lied occasionally. Lemons, mangoes and spinach. (No long term prisoners kept)
Manyoni ...	A.C.	332·6	33·2	Cultivating, repairs to roads, etc.	Good	Yes	Nil	Meals : 12 noon and 5 p.m. Cassava, maize, millet, beans and spinach
Mbeya	A.C.	627	62	General labour. *Hours* :– 7 a.m. to 12 noon and 1 to 5 p.m.	Satisfactory	No	Bronchitis, fever, enteritis, ulcers, constipation, etc.	As laid down for short term prisoners
Mbulu	A.C.	592·55	59·39	Road repairs and cutting wood for the prison. *Hours*:– 6.30 a.m. to 12 noon and 1 p.m. to 4 p.m.	Satisfactory	Yes, but in need of repair	Nil	Meals twice a day 12 noon and 4.30 p.m. Variety : maize 2 lbs., beans 5 ozs., salt ¼ oz. and ½ oz. ghee
Mikindani ...	A.C.	285	82	Fuel cutting, road work, and other minor works such as cleaning drains and cutting the grass from Government premises. *Hours* :– 7 a.m. to 12 noon and 2 to 4. p.m.	Satisfactory	Yes	Headache, constipation, ulcers, injuries, etc.	Beans, maize, millet, etc. Green vegetables supplied when available. Meals are served at 6 a.m., noon and 5.30 p.m.
Mkalama ...	A.C.	1,044	67	Station labour. *Hours* :– In accordance with the Prison Ordinance	Satisfactory	Yes	Bronchitis and minor external injuries	Diet is provided in accordance with the rules laid down in the Prison Ordinance
Morogoro ...	A.C. and S.C.	350	30	Excavation of sand, lime and stone, wood cutting, timber sawing, work on prison garden, transporting of sand, lime and stone, masonry, carpentry, tailoring and smith work; cleaning and sanitation of prison and premises. *Hours* :– 6.30 a.m. to 12 noon and 1 to 4 p.m. daily except on Saturdays 6.30 a.m. to 11.30 a.m, no work on Sunday	Very Good	Yes	Diarrhœa, digestive troubles, cuts, bruises and bronchitis. Some cases of hookworm, most of them imported; few cases of tuberculosis few; cases of imported chickenpox and yaws	As laid down in the Prison Ordinance (14 of 1921) and special diets as may be ordered by Medical Officer. Mealie meal (whole), beans, cassava, millet, whole maize, ghee, salt, onions, fresh meat for all prisoners over six months, wild spinach collected daily, and fruit in season from Government agricultural garden. Meals: 6 a.m., 12 noon and 5 p.m. daily

Report on the Health of Prisoners for 1930—*continued.*

Name Prison	11 System of confinement: Association Cells (A.C.). Single Cells (S.C.).	12 Cubic space available at night per prisoner taking avrage number of prisoners.	13 Floor space in square feet per prisoner taking avaerage number of prisoners.	14 Labour on which prisoners are employed and hours of work.	15 Sanitary condition of prison.	16 Are all cells cemented ?	17 Prevailing diseases.	18 Rules as to diet and hours of meals. What variety is provided : green food ? meat ?
Moshi	A.C.	cupic feet 300	sbuare feet 30	Cleaning ground, fencing, etc. *Hours*:– 7 a.m. to 12 noon and 1 p.m to 4 p.m.	Very satisfactory	Yes	Malaria, bronchitis, intestinal worms, constipation, gonorrhœa	According to Prison Ordinance
Musoma ...	A.C.	411	19·7	Manual labour. *Hours*:– 6 a.m. to 12 noon and 1 p.m. to 4.30 p.m	Good	Yes	Nil	According to Prison Ordinance
Mwanza... ...	A.C. and S.C.	550	32	Rigorous and simple. *Hours*:– 6.30 a.m. to 12 noon and 1 p.m. to 4.30 p.m.	Good	Yes	Malaria	Meat with bones (for long term prisoners), maize (whole), beans, potatoes, ghee and salt. Meals: 6.30 a.m., 12 noon and 5.30 p.m.
Nzega	S.C.	420	30·5	Cutting wood and grass, carrying water, etc. *Hours*:– 6 a.m. to 12 noon 1 p.m. to 4 p.m.	Good	Yes	Bronchitis, constipation, injuries, myalgia	According to Prison Ordinance. Meals: 12 noon and 5 p.m.
Pangani ...	A.C.	400	60	Road repairs, wood cutting, grass cutting and other Government work. *Hours*:– 7 a.m. to 4 p.m. with rest of one hour	Good	Yes	Nil	Short term prisoners get maize, beans, millet, ghee, salt and lemon. No long term prisoners are kept here
Shinyanga ...	A.C.	1,660	60	Cutting wood, clearing grass, carrying water, making bricks, gardening. *Hours*:– Week-days 7 a.m. to 12 noon and 1 p.m. to 4 p.m. Saturdays, 7 a.m. to 1 p.m.	Good	Yes	Bronchitis, venereal diseases and myalgia	Twice daily, 12 noon and 5 p.m. Cassava flour, beans, ghee, salt and spinach in lieu of lemons. (Meat to long term prisoners awaiting confirmation of sentences by High Court).
Singida	A.C.	450	40	Wood cutting, drawing water, and general labour.	Good	No	Nothing special	According to Prison Ordinance

REPORT ON THE HEALTH OF PRISONERS FOR 1930—*continued.*

Name of Prison	11 System of confinement: Association Cells (A.C.). Single Cells (S.C.).	12 Cubic space available at night per prisoner taking average number of prisoners.	13 Floor space in square feet per prisoner taking average number of prisoners	14 Labour on which prisoners area employed and hours of work.	15 Sanitary condition of prison.	16 Are all cells cemented ?	17 Prevailing diseases.	18 Rules as to diet and hours of meals. What variety is provided: green food ? meat ?
Songea	A.C.	cubic feet 111·11	square feet 95·74	General: water, roads, fire-wood, etc. *Hours:* 6.30 to 12 noon and 1 p.m. to 4.30 p.m.	Excellent	Yes, require re-cementing	Pellagra	Meals: 6 a.m., light food; 12 noon, porridge, beans and vegetables; 5 p.m., porridge and beans. No meat being third class prison, but long term prisoners get meat
Sumbawanga ...	A.C.	613·793	68·364	Road work, cultivation and general prison labour (water carrying, wood cutting, etc.) Monday to Friday: 9½ hours daily. Saturday: 5½ hours. Sunday: Nil	Good	No	Local injuries, bronchitis, fevers, diarrhœa, and headache	In accordance with the authorised dietary scale
Tabora	A.C. and S.C.	250	24	Carpentry, masonry, tailoring, blacksmithing tinsmithing, domestic, sanitary, agricultural, water carrying, stone breaking and general labour. *Hours:* 7 a.m. to 4 p.m.	Excellent	Yes	Malaria, coughs and colds, ulcers and injuries, constipation	As per dietary scale laid down. Additional as prescribed by Medical Officer
Tanga	A.C and S.C.	25	21	Tailoring, soap making, lime burning, general repairs, sanitation, station and town improvements. *Hours:* 6.30 to 12 noon and 1 p.m. to 4 p.m. All gangs working over half a mile from the prison take their mid-day meal with them which is cooked in the morning	Good	Yes	Fever, malaria type	Three meals per day: 6 a.m. 12 noon and 5.30 p.m. *Natives:* Lemons four times a week and meat 6 oz. daily. *Europeans:* Vegetables daily and meat 12 oz. as per Government scale laid down. European and Asiatic prisoners three meals per day served at suitable hours as per Prison Ordinance

REPORT ON THE HEALTH OF PRISONERS FOR 1930—*continued.*

Name of Prison	11 System of confinement: Association Cells (A.C.). Single Cells (S.C.).	12 Cubic space available at night per prisoner taking average number of prisoners.	13 Floor space in square feet per prisoner taking average number of prisoners.	14 Labour on which prisoners are employed and hours of work.	15 Sanitary condition of prison.	16 Are all cells cemented ?	17 Prevailing diseases.	17 Rules as to diet and hours of meals. What variety is provided : green food ? meat ?
Tukuyu... ...	A.C.	cubic feet 350	square feet 72	Manual labour, *Hours:* Nine	Satisfactory	No	Pneumonia, chickenpox	(1) *Short term:* 2 lb. mealies, 8 oz. beans, ¼ oz. salt and ghee. (2) *Long term:* ½ lb. meat three times weekly, 3 bananas, 6 oz. beans, ¼ oz. salt. *Other days:* 2 lb. mealies, 6 oz. beans, 6 bananas, ghee
Tunduru ...	A.C.	690	46	General station work from 6 a.m. to 12 noon and 2 p.m. to 4 p.m.	Satisfactory	Yes	Nil	Two meals: one at 12 noon and another at 6 p.m. Maize flour, beans, meat and lemons
Utete	A.C.	570	55	Town and station improvements, whitewashing and minor repairs to prison buildings, etc. *Hours:* 7 a.m. to 12 noon and 2 p.m. to 4 p.m.	Quite satisfactory	Yes	Fever (probably malaria), diarrhœa, constipation, local injuries, bronchitis, etc.	Twice a day: 12 noon and 5.30 p.m. Millet, beans, rice, meat, limes and ghee, etc.

Name of Prison	19. Vaccinations.						20. Infectious diseases			
	Number during 1930				Number excused vaccination on account of previous smallpox or successful recent vaccination	Number not protected against smallpox	Number of cases of—			
	Vaccinated	Successful	Modified	Failures			Chickenpox	Dysentery	Influenza	Others
Arusha	148	61	16	71	—	—	—	—	—	—
Bagamoyo ...	18	—	—	—	—	—	—	—	—	—
Biharamulo ...	15	15	—	—	—	—	—	—	—	—
Bukoba ...	62	50	4	8	—	—	—	—	—	—
Dar es Salaam ...	Whenever found necessary by Prison Medical Officer	—	—	—	—	—	Small outbreak	—	—	—
Dodoma ...	182	—	—	—	If prisoners have not been recently vaccinated on admission vaccination is carried out.	—	—	2	4	One case mumps
Iringa	69	—	—	—	—	All prisoners are protected against small pox	—	—	—	Only eight cases of scabies have been observed during the year
Kahama ...	Nil	—	—	—	—	—	—	—	—	—
Kasulu	Nil	—	—	—	—	—	—	—	—	—
Kibondo ...	Prisoners not compulsorily vaccinated, but if there is any epidemic, they are vaccinated	—	—	—	—	—	—	—	—	—
Kigoma... ...	All new admittances	—	—	—	—	—	Small outbreak	—	—	Leprosy
Kilwa	Nil	—	—	—	—	—	—	—	—	—
Kondoa... ...	Nil	—	—	—	—	—	—	—	—	—
Lindi	Nil	—	—	—	—	—	—	—	—	One case leprosy
Lushoto... ...	35	29	6	—	All were voluntarily vaccinated on each occasion without exception					
Mafia	All found vaccinated on admission	—	—	—	—	—	—	—	—	—
Mahenge ...	22	—	—	—	34	—	—	—	—	—

REPORT ON THE HEALTH OF PRISONERS FOR 1930—*continued.*

Name of Prison	19. Vaccinations						20. Infectious diseases			
	Number during 1930				Number excused vaccination on account of previous smallpox or successful recent vaccination	Number not protected against smallpox	Number of cases of—			
	Vaccinated	Successfull	Modified	Failures			Chickenpox	Dysentery	Influenza	Others
Manyoni ...	Nil	—	—	—	—	—	—	—	—	—
Mbeya	5	—	—	—	—	—	—	—	—	—
Mbulu	Nil	—	—	—	—	—	—	—	—	—
Mikindani ...	Vaccinations performed when necessary	—	—	—	—	—	—	—	—	—
Mkalama ...	Nil	—	—	—	—	—	—	—	—	—
Morogoro ...	All prisoners vaccinated	All	—	—	—	—	—	—	—	—
Moshi	Nil	—	—	—	—	—	—	—	—	—
Musoma ...	Nil	—	—	—	—	—	—	—	—	—
Mwanza... ...	Nil	—	—	—	—	—	—	—	—	—
Nzega	Nil	—	—	—	—	—	—	—	—	—
Pangani... ...	15	—	—	—	—	—	—	—	—	—
Shinyanga ...	42	24	—	18	—	—	—	—	—	—
Singida	Prisoners are vaccinated on admission	—	—	—	—	—	—	—	—	—
Songea	All prisoners are vaccinated	—	—	—	—	—	—	—	1	—
Sumbawanga ...	25	12	9	4	19	—	—	2	—	—
Tabora	All	—	—	—	—	—	55	—	20	—
Tanga	210	—	—	—	434	178	—	—	—	—
Tukuyu... ...	All unvaccinated	—	—	—	—	—	Small outbreak	—	—	—
Tunduru ...	11	—	—	—	—	—	—	—	—	—
Utete	All vaccinated once during the year	—	—	—	—	—	—	—	—	—

REPORT ON THE HEALTH OF PRISONERS FOR 1930—*continued.*

Name of Prison	21. Insects and other Pests in Prison.				
	Bugs	Fleas	*Ornithodorus moubata*	Rats	Mice
Arusha	Nil	—	—	—	—
Bagamoyo ...	Nil	—	—	—	—
Biharamulo ...	Nil	—	—	—	—
Bukoba ...	Nil	—	—	—	—
Dar es Salaam ...	Nil	—	—	—	—
Dodoma ...	There have been no signs of insects or other pests in the gaol during the year. The cells are thoroughly disinfected every morning and all sleeping mats and blankets exposed to sun until time of lock up.				
Iringa	Nil	—	—	—	—
Kahama ...	—	—	—	Yes, rats trapped	—
Kasulu	Yes	—	Very few ticks have been found occasionally.	Floor cemented and cracks and crevices filled in	—
Kibondo ...	Nil	—	—	—	—
Kigoma... ...	New prisoners bring in lice and bugs, etc. Cells, persons and clothing are washed daily, and regular whitewashing and tarring of premises is carried out. Heads are kept shaved				
Kilwa	Nil	—	—	—	—
Kondoa... ...	—	—	—	—	—
Lindi	(Mosquitoes and sand fly)	—	—	Rats; B.B. traps	—
Lushoto... ...	Nil	—	—	Yes	—
Mafia	Nil	—	—	—	—
Mahenge ...	—	—	—	A few rats are seen now and then in the food store. They are caught by means of traps and burnt	—
Manyoni ...	Nil	—	—	—	—

Name of Prison	21. Insects and other Pests in Prison.				
	Bugs	Fleas	*Ornithodorus moubata*	Rats	Mice
Mbeya	—	—	—	—	Few mice only and nothing done for that
Mbulu	Nil	—	—	—	—
Mikindani ...	Nil	—	—	—	—
Mkalama ...	There are evidences of bugs	—	—	Rats; traps, are supplied at intervals	—
Morogoro ...	—	—	—	Rats sometimes come in from outside. Poisoned or killed by cats	—
Moshi	Nil	—	—	—	—
Musoma ...	Nil	—	—	—	—
Mwanza ...	Nil	—	—	—	—
Nzega	Nil	—	—	—	—
Pangani ...	Nil	—	—	—	—
Shinyanga ...	Nil	—	—	—	—
Singida	Nil	—	—	—	—
Songea	Nil	—	—	—	—
Sumbawanga ...	Prison cleaned daily with disinfectants. Cloths and blankets washed; but rats are common in the Prison Store: rat-traps and poison used				
Tabora	Nil	—	—	—	—
Tanga	Nil	—	—	—	—
Tukuyu... ...	—	Yes	—	—	—
Tunduru ...	Nil	—	—	—	—
Utete	—	—	—	The prison was infested with rats so rat poison and traps were supplied	—

REPORT ON THE HELATH OF PRISONERS FOR 1930—*continued.*

Name of Prison	22. Suggestions by the Medical Officer in charge as to improvements required and date when made			
	(*a*) Accommodation and Ventilation	(*b*) Diet	(*c*) Sanitation	(*d*) Others
Arusha	Nil	—	—	—
Bagamoyo ...	Nil	—	—	—
Biharamulo ...	Nil	—	—	—
Bukoba ...	—	—	New latrines for female prisoners	—
Dar es Salaam ...	Nil	—	—	—
Dodoma ...	Further improvement in ventilation of cells	—	—	—
Iringa	Nil	—	—	—
Kahama ...	—	—	Latrine partition should be built up to the roof with mud, brick or wattle and the floor cemented	—
Kasulu	Nil	—	—	—
Kibondo ...	Nil	—	—	—
Kigoma... ...	Minor points of hygiene	—	Minor points of sanitation	—
Kilwa	Nil	—	—	—
Kondoa... ...	Nil	—	—	—
Lindi	Nil	—	—	—
Lushoto... ...	Nil	—	—	—
Mafia	Nil	—	—	—
Mahenge ...	Nil	—	—	—
Manyoni ...	—	—	—	—
Mbeya	Cementing the floors of calls	—	—	Provision of more blankets for the night

Name of Prison	22. Suggestions by the Medical Officer in charge as to improvements required and date when made.			
	(*a*) Accommodation and Ventilation	(*b*) Diet	(*c*) Sanitation	(*d*) Others
Mbulu	Nil	—	—	—
Mikindani ...	Nil	—	—	—
Mkalama ...	Nil	—	—	—
Morogoro ...	Nil	—	—	—
Moshi	Nil	—	—	—
Musoma ...	Nil	—	—	—
Mwanza... ...	Nil	—	—	—
Nzega	Nil	—	—	—
Pangani... ...	Nil	—	—	—
Shinyanga ...	Nil	—	—	—
Singida	Nil	—	—	—
Songea	—	4 ozs. of green vegetables daily for each prisoner in place of lemon thrice weekly	—	—
Sumbawanga ...	Nil	—	—	—
Tabora	Nil	—	—	—
Tanga	—	Porridge diet for natives of Arusha	—	—
Tukuyu... ...	Nil	—	—	—
Tunduru ...	Nil	—	—	—
Utete	Nil	—	—	—

Name of Prison	23. Action taken by the Prison Authorities as a result of 22			
	(*a*)	(*b*)	(*c*)	(*d*)
Arusha	—	—	—	—
Bagamoyo ...	—	—	—	—
Biharamulo ...	—	—	—	—
Bukoba ...	—	—	Carried out	—
Dar es Salaam ...	—	—	—	—
Dodoma ...	All cells were repaired and extra ventilators erected during the year.		—	—
Iringa	—	—	—	—
Kahama ...	—	—	—	—
Kasulu	—	—	—	—
Kibondo ...	—	—	All attended to	—
Kigoma... ...	All attended to	—	—	—
Kilwa	—	—	—	—
Kondoa... ...	—	—	—	—
Lindi	—	—	—	—
Lushoto ...	—	—	—	—
Mafia	—	—	—	—
Mahenge ...	—	—	—	—
Manyoni ...	—	—	—	—
Mbeya	—	—	—	—
Mbulu	—	—	—	—
Mikindani ...	—	—	—	—
Mkalama ...	—	—	—	—
Morogoro ...	—	—	—	—
Moshi	—	—	—	—
Musoma ...	—	—	—	—
Mwanza... ...	—	—	—	—
Nzega	—	—	—	—
Pangani... ...	—	—	—	—
Shinyanga ...	—	—	—	—
Singida	—	—	—	—
Songea	4 oz. of green vegetables issued to each prisoner. As per suggestions in 1929: (1) proper kitchen has been erected; (2) separate latrine and bath have been made for male and female prisoners; and (3) the iron roofing of No. 3 Ward has not been renewed.			
Sumbawanga ...	—	—	—	—
Tabora	—	Carried out	—	—
Tanga	—	—	—	—
Tukuyu... ...	—	—	—	—
Tunduru ...	—	—	—	—
Utete	—	—	—	—

Report on the Health of Prisoners for 1930—*continued.*

Name of Prison	24 What sanitary arrangements are there in the cells for use at night	25 Is drinking water provided for use at night ?	26 Is there a weight register and is it kept up to date ?	27 What number of blankets is provided for each prisoner ?	28 Is the clothing sufficient ?	29 Further remarks and suggestions
Arusha	Latrine buckets, etc.	Yes	Yes	One in warm weather. Two in cold weather. Waist coats and coir sleeping mats are also provided	Yes	Prison roof repaired and made completely watertight. All cells limewashed three times during the year. Lower half of walls painted with coal tar
Bagamoyo ...	One latrine bucket per each cell is provided	Yes	Yes	One	Yes	Nil
Biharamulo ...	Latrine pans	If required	No	Two	Yes	Nil
Bukoba ...	Urinals and bed pans	Yes	Yes	Two	Yes	Nil
Dar es Salaam ...	The two large wards accommodating 80 and 130 convicts have latrines for night use. The small wards and cells have bucket principle	Suppled in pails and dixies	Yes; all long term prisoners are weighed weekly	Jumpers and shorts supplied as required, each prisoner issued on admission with sleeping mat and a blanket	—	Nil
Dodoma ...	Urinal tub and sanitary bucket	Yes	Yes	One and a sleeping mat—old men receive two each	Yes	Nil
Iringa	Night soil buckets are available in each cell	Yes	Yes	Each prisoner allowed two	Yes	Nil
Kahama ...	Buckets placed in each cell at night and removed in morning	Yes	—	One	Yes	Nil
Kasulo	Buckets	Yes	No	One	Yes	Nil
Kibondo ...	Buckets	Yes	—	One mat and one blanket	Yes	Nil
Kigoma... ...	Buckets	Yes	Yes	One	Yes	Nil
Kilwa	Latrine buckets	Yes	Yes	Two	Yes	Nil
Kondoa... ...	Urine drums and latrine pans	Yes	No	One	Yes	Nil
Lindi	Buckets	Yes	Yes	One in hot season and two in the cold	Yes	Nil
Lushoto... ...	Latrine pan for each cell	Yes	Yes	Two	Yes	Nil

Name of Prison	24 What sanitary arrangements are there in the cells for use at night ?	25 Is drinking water provided for use at night ?	26 Is there a weight register and is it kept up to date ?	27 What number of blankets is provided for each prisoner ?	28 Is the clothing sufficient ?	29 Further remarks and suggestions
Mafia	Sanitary buckets	Yes	No ; long term prisoners not kept	One and one sleeping mat	Yes	A few cells become insanitary during the rainy season on account of leaking roof. There is no satisfactory kitchen in the gaol with a proper outlet for the smoke ; the latter enters the cells while cooking is proceeding. Reroofing of prison and a proper kitchen are required
Mahenge ...	Pans are provided in each cell at night	Yes	No	Two and also a mat to sleep on	Yes	Large cracks are appearing in certain of the walls of the gaol. This appears to be owing to subsidence of foundation. I recommend that steps be taken to remedy these defects
Manyoni ...	Latrine pans	Yes	No	Two	Yes	Nil
Mbeya	Buckets	Yes	No	Two ; extra in case of illness	Yes	Nil
Mbulu	Latrine pans	No	No	One generally and two when required	Yes	Nil
Mikindani ...	Latrine pans	Yes	—	One	Yes	Nil
Mkalama ...	Buckets	Yes	No	One	Yes	Nil
Morogoro ...	Sanitary buckets	Yes	Yes	Long term prisoners two and a mat ; short term one and a mat. More when required by Medical Officer	Yes	Nil
Moshi	Buckets	Yes	Yes	Two	Yes	Nil
Musoma ...	Buckets	Yes	Yes	One	Yes	Nil
Mwanza... ...	Two buckets are placed in each cell	Yes	Yes	One	Yes	Nil
Nzega	Sanitary buckets	Yes	No	One and a coir mattress	Yes	Nil
Pangani... ...	Pans	Yes	Yes	One	Yes	Nil
Shinyanga ...	Drums provided	Yes	No	Two	Yes	Nil
Singida	Urine drums in cells at night	Yes	No	Two blankets and one mat	Yes	Nil
Songea	Urine drums with lids in cells at night	Yes	No; being third class prison	Two and one sleeping mat	Yes	Nil

REPORT ON THE HEALTH OF PRISONERS FOR 1930—*continued.*

Name of Prison	24 What Sanitary arrangements are there in the cells for use at night ?	25 Is drinking water provided for use at night ?	26 Is there a weight register and is it kept up to date ?	27 What number of blankets is provided for each prisoner ?	28 Is the clothing sufficient ?	29 Further remarks and suggestions.
Sumbawanga ...	Sanitary buckets	Yes	No	Two	Yes	Nil
Tabora	Bucket system	Yes	Yes	One and a mat	Yes	Nil
Tanga	Sanitary buckets in cells	Yes	Yes	One and a sleeping mat. Two for aged prisoners	Yes	Nil
Tukuyu... ...	Buckets	Yes	Yes	Three and a sleeping mat	Yes	Nil
Tunduru ...	Bucket for night soil and urine	Yes	No	One or two blankets	Yes	Nil
Utete	Latrine pans are provided for use at night from 6 p.m.	Yes	No	One and one rope sleeping mat	Yes	Nil

SECTION VIII.—RAINFALL.

TOTAL RAINFALL IN MILLIMETRES BY STATIONS, 1930.

Districts	Stations	Feet above sea level	Rainfall in Millimetres
CENTRAL LINE AREA :			
Dar es Salaam	Dar es Salaam	S.L.	1,159·2
Morogoro	Morogoro	1,628	878·0
	Kilosa	1,606	1,007·9
Dodoma	Dodoma	3,693	720·3
	Manyoni	4,135	712·7
	Singida	5,233	812·1
	Mpwapwa	3,000	701·2
Tabora	Tabora	4,000	1,162·5
	Kahama	4,055	1,293·2
	Nzega	—	1,072·4
Kigoma	Kigoma	2,531	893·9
	Kasulu	4,530	584·1
	Kibondo	4,981	1,412·6
COASTAL AREA, SOUTH:			
Lindi	Lindi	S.L.	950·4
	Tunduru	2,300	1,026·1
	Masasi	1,505	1,158·1
	Mikindani	S.L.	1,006·6
Kilwa	Kilwa	S.L.	1,480·9
	Liwale	1,500	1,072·7
	Kibata	1,700	1,373·2
Rufiji	Utete	327	961·0
COASTAL AREA, NORTH:			
Pangani	Pangani	S.L.	1,013·4
Tanga	Amani	3,004	1,524·0
NORTHERN HINTERLAND:			
Moshi	Moshi	2,649	1,058·9
Arusha	Arusha	4,416	1,433·4
	Mbulu	5,900	950·2
Mwanza	Mwanza	3,709	1,262·5
	Musoma	3,709	655·6
Bukoba	Bukoba	3,709	1,863·1
	Biharamulo	4,350	1,169·6
Usambara	Lushoto	4,579	1,111·0
Kondoa	Kondoa	4,610	1,081·7
	Mkalama	4,235	1,011·1
SOUTHERN HINTERLAND :			
Songea	Songea	3,826	1,251·4
	Milo	8,300	1,790·1
Iringa	Iringa	5,365	933·9
	Njombe	—	1,306·9
Rungwe	Tukuyu	5,069	2,861·2
Mbeya	Mbeya	—	1,151·9
Ufipa	Sumbawanga	5,100	909·1

SECTION IX.—SCIENTIFIC.

Abridged Report by the Entomologist.

Owing to the necessity for economy in printing, only a brief account of the work done and the results obtained can be published. A more complete record has been filed for reference, and it is hoped that this may be published later, perhaps under the Malaria Survey. In the meantime warning must be given lest the following be taken as a complete record.

An Investigation of the Mosquitoes of Bukoba, mainly with regard to the Transmission of Malaria.

The field work of this investigation was done between the 18th February and the 11th March, 1930. Most of the laboratory work on the material collected was done afterwards in the laboratory at Dar es Salaam.

The statement has been made that there are no mosquitoes at Bukoba, or at least, for all practical purposes they may be regarded as absent; and the majority of European residents were found to be sleeping without nets. When cases of malaria occurred, it seems to have been assumed that they were either contracted when the person had been out of Bukoba on a visit, or, in most cases, were relapses. Such, at least, was the belief of the laymen resident there. The fact that there have been recently no less than nine blackwater cases in Bukoba, the large majority of which patients lived regularly in the township (that is, were not taken out into the district by their pursuits) does not seem to have been considered. Some of these nine patients had, moreover, two, and one three attacks. Nor is blackwater new in Bukoba, as deaths occurred from it as far back as German days. I consider it desirable to commence this report by correcting the fallacy that mosquitoes are negligible in Bukoba. The explanation of how such a fallacy has arisen is not difficult to find. There are, indeed, few mosquitoes in Bukoba, but a large proportion of them are *Anopheles gambiæ;* and the numbers of this species are sufficient to transmit malaria, while their unobstrusive habits tend to cause them to be overlooked.

Determination of Breeding Places.

I made a careful search of the Township area and surrounding land for mosquito breeding places. Most of the larvæ and pupæ collected were bred out, but samples of the larvæ were preserved. Provisional identifications were made on the spot where possible, and all the material was re-examined in the laboratory. By far the most common Anopheline found was *Anopheles gambiæ*, Giles. It was found breeding chiefly in water in cultivated parts, mainly in water between old and present "matuta", and in the little streams which trickle between native cultivations. The breeding areas were marked on a suitable map, copies of which have been filed with the full report. It was noted that the species was absent from the large marshy areas to the west of the town; probably by reason of the peaty nature and acid reaction of the water there, being unsuited to the species. Care should thus be taken in any attempt to drain or alter these areas, lest they may be made wholly or partially suitable to the species.

Anopheles rhodesiensis, Theo. and *A. marshalli*, Theo. were also found but not in numbers.

During my work on Anophelines the following Culecines were encountered, *Culex pipiens*, L.; *C. consimilis*, Newst; *C. guiarti*, Blanch.; *C. decens*, Theo.; *C. annulioris*, Theo.; *C. rima*, Theo.; *C. univittatus*, Theo.; *Culex duttoni*, Theo.; *Aedes* (*Banksinella*) *lineatopennis*, Theo.; *Tæniorhynchus* (*Coquillettidia*) *fuscopennatus*, Theo.; *Mimomyia plumosa*, Theo.; *Aedes* (*Aedimorphus*) *argenteopunctatus*, Theo.; *Lutzia tigripes*, Theo.; although this list of Culecines seems formidable most of the species are present in small numbers only, and all together the Culecines are not sufficiently numerous to be an annoyance to the average resident. The recorded breeding places, etc., of the various species are detailed in the full report.

CONTROL MEASURES.

The problem at Bukoba is entirely an Anopheline one, the Culecines being negligible as a source of trouble. Among the Anopheles species only one, A. gambiæ, is of importance as a malaria carrier. The other two are not proved vectors of malaria and occur in small numbers; moreover, in treating the A. gambiæ breeding places, the breeding places of the other species will be practically eliminated. With regard to control measures the breeding areas of Anopheles gambiæ may be divided into two categories. In the first of these control by the planting of Eucalyptus trees is advised. The scheme is detailed in the full report and was strongly advised for the following reasons:—

(1) The trees would not provide a sheltered passage for Anophelines into the Township and European Quarter, as there are no Anopheline breeding grounds beyond the proposed plantations for a considerable distance.

(2) The scheme is a very good commercial proposition as the forest produce (for which the local demand is good and the present supply poor) should return to Government a very substantial profit, as it puts to good use a piece of land not at present required for building, and as it does away with dangerous Anopheline breeding places at the same time.

The second category of breeding place is that where control by the establishment of Eucalyptus is not practicable. Here the use of Paris Green mixture as a larvicide is advised. Details are given in the full report. The use of Paris Green is particularly suitable in Bukoba, as there is no Culecine problem.

As a result of my report to the Honourable the Director of Medical and Sanitary Services, expenditure was sanctioned for the necessary afforestation, and the Forest Department kindly undertook the supervision of the work, which was commenced with an allocation of £100. Unfortunately the " Special Measures and Epidemic Outbreaks " vote from which the additional money necessary would have come, was exhausted by the recent smallpox outbreak, and as no further funds could be provided, owing to the financial stringency, the work had to be abandoned after the planting of 28½ acres in the mid-township area. This is unfortunate, as, even if the present trees be not killed by weed growth before a proper establishment can be obtained, the resulting plantation will provide a sheltered passage for Anopheles from the unplanted breeding places to the European Quarter. The Anopheline control in the breeding places which remain will thus have to be particularly thorough.

THE MOSQUITOES OF MWANZA, MAINLY WITH REGARD TO THE TRANSMISSION OF MALARIA.

The field work of this investigation was done between the 12th and 27th March, 1930. The majority of the laboratory work was done in the laboratory at Dar es Salaam. At the time I was in Mwanza there had been and still continued particularly heavy rains.

The Township and some parts outside it were searched for breeding places. These can be classed in two classes. Firstly the lake shore and the wet land adjoining, and secondly the swampy land in the wet valley called "Katusi". The important species found breeding on the lake shore was *Anopheles gambiæ*, Giles. This species was very numerous and was found in the pools among all the cultivations and in pools among short grass or on bare patches. It was not found in water among the tall grasses on the lake shore. It seemed to thrive in the pools between the "matuta" irrespective of the crop being grown, and was numerous in rice swamps. It is by far the most common Anopheline. It was also found in pools of rain water in depressions in rocks, but not apparently where the water was liable to become strongly heated by the sun. I would expect that it would breed in any pools in rock holes during prolonged dull weather. While I was in Mwanza there were hot sunny spells between the falls of rain. *Anopheles rhodesiensis*, Theo.; *A. funestus*, Giles; *A. mauritianus*, Grp.; *A. pharœnsis*, Theo., were also collected but in lesser numbers and are of less importance. *A. funestus* was found breeding in shaded parts among the long grass on the lake shore. It was not very numerous but is a malaria carrier and will probably breed in that situation all the year round, as its breeding places are not dependent on heavy rains.

In the "Katusi" area *Anopheles gambiæ* was also found to be the most common Anopheline. It was breeding freely in pools, both among cultivations and in other places which were not densely shaded. *A. funestus*, was found breeding in the densely shaded parts of pools, but was rare.

To effect a satisfactory control of *Anopheles gambiæ*, the most dangerous species, would be a difficult undertaking. It would imply the prohibition of agriculture in the foreshore breeding areas, the fencing off of these areas and the making of them prohibited ground to man and stock, along with the suitable levelling and drainage of the areas, preferably by covered subsoil drains wherever these were practicable.

This course might not be desirable from the point of view of food supplies and would be a difficult and expensive task. I think that, in the circumstances, the second best course must be followed. This is to treat the areas with larvicide during the times of the rains and afterwards, until the land is dry again. This cannot be expected to bring about a complete control of *A. gambiæ*, especially using African native labour; moreover the production from the permanent breeding places is not negligible. To bring about a satisfactory control of malaria it will be necessary to have the houses of susceptible persons properly screened. Most of the present European houses are of a type which lends itself to efficient screening. The screens should be fitted to both back and front verandahs and all windows, care being taken at the eaves and other joints; and both front and back entrances must be of the type having a porch with double doors opening outwards. I suggest that all government houses be treated in this manner (a considerable amount of fairly good screening exists on the fronts of most of the houses already); that all other residents be advised to have their houses screened, and that, after a suitable period of notice, no new houses be passed as fit for occupation by races susceptible to malaria, unless they are efficiently screened. In a place with a prevalence of *Anopheles gambiæ* like that of Mwanza, a house which is not screened is indeed not fit for occupation. The Anopheline situation in Mwanza is serious.

When the work on Anophelines was in progress Culecines were collected as met with. The collection comprised the following species:—*Culex decens*, Theo.; *C. pipiens*, L.; *C. duttoni*, Theo.; *C. univittatus*, Theo.; *C. bitæniorhynchus*, Giles; *C. quasigelidus*, Theo.; *C. laurenti*, Newst.; *Aedes* (*Aedimorphus*) *vittatus*, Theo.; *Tæniorhynchus* (*Coquillettidia*) *aurites*, Theo.; *Tæniorhynchus* (*Coquillettidia*) *metallicus*, Theo.; *Lutzia tigripes*, Grp.

A fuller account of the Anopheline situation and particulars of the breeding places, etc., of the Culecines is contained in the full report.

THE ANOPHELINE BREEDING GROUNDS LIKELY TO BE OF IMPORTANCE IN CONNECTION WITH THE NEW HOUSING SITES AT OYSTER BAY.

In view of the likely extension of the Township area to include the proposed housing sites at Oyster Bay, I made a survey of the Anopheline breeding grounds which may supply vectors of malaria to this new residential area. I made a search in an area of a mile radius from the building plots and marked the breeding areas of varied importance on a map of scale 1:10,000 kindly supplied by the Survey Department. A scheme for control measures was also submitted. The area, on the whole, is favourably situated with regard to Anophelism when compared with the rest of Dar es Salaam.

In my report for 1926 I wrote: "It requires not merely an Anopheline but a malaria-infected Anopheline to infect man with the disease. It is generally accepted that a considerable number of natives carry from childhood latent infections of malaria and it is certain that they are more exposed to infective bites, although they may not develop the disease in an acute form frequently. It is therefore inadvisable for Europeans to have native servants sleeping on their premises, as such increases the probability of infection of any Anophelines which may be present." I was very surprised to see that, when the houses at Oyster Bay were being built, servants' quarters were being added. In my report I did not mention the inadvisability of building servants' quarters to the houses as I understood that it was proposed to make plots available for native houses on an area on the west side of the road about half a mile from the housing cites. This scheme would have been a very sound one indeed, as not only would there have been less chance of infection of any Anopheles in the houses of malaria susceptibles, but the servants' settlement would have served as a screen and the Anopheles from the breeding places would probably have gone no further. Despite the fact that the Oyster Bay houses will be in a very good situation from the point of view of malaria, it must not be assumed that all caution can be thrown to the winds. I recommend that the scheme of a servants' colony apart from the European houses be taken up, that servants' quarters be not added to the houses not yet built or completed, and that the present servants' quarters be vacated as soon as possible.

THE MOSQUITOES OF MOROGORO AND KILOSA, MAINLY WITH REGARD TO THE TRANSMISSION OF MALARIA.

Morogoro.

The investigation in Morogoro was commenced on the 9th and finished on the 18th August, 1930. The majority of the laboratory work was done subsequently in Dar es Salaam.

The permanent breeding places of mosquitoes affecting Morogoro are few, and consist of (1) Morogoro River and its tributaries, viz., the Karakara River and the Kikundi stream; (2) the Guliwiri swamp. The rivers only breed very few mosquitoes in small backwaters and side pools and are of little importance so I will not give detailed results in this abridged report. The Kikundi stream is only continuous from the hills to the river in the wet season and some months afterwards. At other times it sinks into the soil to the west of the old native quarter and forms a number of pools which breed *Anopheles gambiæ* and other species. These are kept down by the cutting of the banks and oiling. It is hoped to report later on further work on this stream and the Mlali Road swamp near it. The Guluwiri swamp is a permanent breeding place of *Anopheles gambiæ* and a few *A. funestus.* It is one-and-a-half miles from the town, however and, on present findings, I do not consider it of sufficient importance to justify the expenditure of treating or attempting to drain it.

Of the temporary breeding places in Morogoro the Mlali Road swamp is the most important. This was practically all dry at the time of my visit and as it is hoped to do more work on it later it will not be discussed here. A full report on the mosquito conditions in the permanent and temporary breeding places has been prepared and filed. Summing up I may write that the conditions in Morogoro with regard to malaria are satisfactory. The breeding places are not extensive during the dry season, and from present findings, I can advise no other control measures than those which I found were being efficiently planned and carried out by the Sanitary Superintendent stationed there. On future work it is hoped to base a scheme of permanent treatment for the Kikundi stream and the Mlali Road swamp.

Kilosa.

An investigation of the Anophelines of Kilosa was made from the 19th to the 26th August, the laboratory work in connection therewith being done subsequently in Dar es Salaam.

The permanent breeding places of Anophelines in Kilosa consist of (a) the Mukondowa River, (b) a very small piece of drain on both sides of the Kilosa-Kimamba Road about 1·4 miles from the centre of Kilosa and (c) parts of the drain which commences near the west-end of the escarpment below the European residential area, and, passing through the Bazaar area, below the railway and along one side of the Native quarter eventually finds its way to the river. Of these breeding places the most extensive is the river. This has a wide and, normally, shallow bed, which is not completely filled by water but has numerous islands around which small streams flow. The level of the water in the river and hence the numbers of these small streams and their depth vary considerably. The result of this state of affairs is that pools, backwaters and other suitable breeding places are being continually formed, destroyed and re-formed, as the flow of the river varies in correlation with the precipitation on, and the drainage from its catchment areas. Among the Anopheles species collected in the river were *A. funestus* and *A. gambiæ*, the latter being the most numerous species of Anopheles found. Both these species are important vectors of malaria. The method of control recommended is the use of Paris Green mixture.

The small piece of drain on the Kilosa-Kimamba Road is of importance in view of its proximity to the hospital. Among other species were found *A. gambiæ* and *A. funestus*. Control should be by the use of Paris Green mixture.

The drain in the township was partly dry at the time of my visit; but, in the pools which remained I found, among others, larvæ of *A. gambiæ* and *A. funestus*. A careful levelling on this drain and the surrounding land would be required before it could be set in order to the best advantage.

The temporary breeding places of Anopheles at Kilosa would appear to be considerable; but as I have not seen them in the rainy season I can make no recommendations.

The details of all the species found and their breeding places, etc., are contained in the full report along with a discussion of control measures. I may sum up by writing that the Anopheline situation in Kilosa is serious. The complete control of the breeding places of vectors of malaria is not possible in existing conditions, and I consider that houses in Kilosa should be efficiently screened and fitted with porch entrances. I think the Government should set the lead in this direction with regard to the houses of civil servants, not only from any ethical or humane point of view, but from the mere logical point of view of added efficiency and a greater return for salaries paid. I consider that, in places where reasonable control of the breeding of the vectors of malaria cannot be attained, the Government cannot afford to leave the officials' quarters unscreened.

Short visits were made to Ngerengere, Mikesse and Kimamba. Reports on these are in my full report.

AN INVESTIGATION OF THE MOSQUITOES BREEDING IN THE RIVERS CROSSING THE KILOSA-MAHENGE ROAD BETWEEN KILOSA AND THE KILOMBERO RIVER.

When the Director of Medical and Sanitary Services was on safari on this road some years ago he noticed that Anopheline larvæ could be found, on casual search, in some of these rivers but not in others. He instructed me to make a safari with a view to finding out how far a systematic search would confirm this finding; and, secondly, if this localisation of distribution did exist what factor or factors might be responsible for it. In this way, it was hoped, some information might be obtained which would prove of value in the control of Anopheles breeding elsewhere.

The examination of the river crossings for quarter to half a mile on each side of the road occupied about the first half of November. During this period many of the rivers were dry in parts or completely dry. In the examination of the crossings which contained water (about forty in number), I found that some contained Anopheles larvæ and some did not. I do not think that there is any intrinsic difference in the water of the various rivers to account for the difference. Larvæ were very scarce in those rivers in which they occurred, and this due to what I may call mechanical conditions, for lack of a better name. To be a suitable mosquito breeding place moving water requires, among other things, shelter which can firstly prevent the washing out of the larvæ or provide them with some hold, and secondly give sufficient protection from fish and other predaceous enemies. At the time of my inspection this shelter was very scarce. The water, being low, was sometimes confined to a more or less clear course in the middle of the river bed, but usually the lack of shelter was due to the nature of the river banks and bed. In the higher parts above the road the river beds were mostly rocky, and it was only in side pools among the rocks that larvæ could survive. In the lower flat lands the river beds are mostly sandy, and the banks were covered with coarse grasses and reeds, which held the banks together and prevented the formation of many side pools, and moreover often extended into the water or right across the bed and kept out the growth of finer grasses, which could have provided the necessary shelter for mosquito larvæ. Shoals of small fish were occasionally seen swimming among these coarse reed growths. Little backwaters and pools cut off from the main stream, and other small parts where finer grasses were growing did occur; and it was in these that the collection of larvæ were obtained in the lower parts of the rivers. These favourable breeding places were not common, any more than were the suitable pools in the higher rocky parts of the rivers. In a number of the rivers, which did not have suitable breeding places, no larvæ could be found, and in the pools where larvæ did occur their numbers were small.

Notes on each river and on the species collected therefrom are given in my full report.

It is perhaps necessary, however, to give a word of warning. During the time of my visit the numbers of vectors of malaria was small; after the rains, however, the numbers will probably be very large, as there are large tracks of land to the east of the road which are obviously subject to flooding after heavy rains, and from which I would expect large numbers of *Anopheles gambiæ*. This warning has been added lest it be assumed from this report that the parts visited are likely to be free from malaria.

COLLECTIONS RECEIVED AT THE LABORATORY.

Thirty-five collections of Insects and Arachnids have been received and reported on. Collections of insects from the various stations in the Territory are very useful in filling up the card index of the distribution of Arthropods of medical importance, and it is regretted that more collections are not received from Medical and Sanitation Officers throughout the Territory. The collections received came from only seven individuals. One excellent collection, containing pinned specimens from over two hundred findings of mosquitoes, was received from the Sanitary Superintendent, Bukoba. Although such collections are indeed very welcome, less comprehensive ones, no matter how small, are also valuable. Moreover, although specimens properly pinned travel with less chance of damage, it is not essential that they should be pinned. I take this opportunity of thanking the following gentlemen for their assistance in this matter: Dr. J. O. Shircore, Dr. J. F. Corson, Dr. R. R. Scott, Dr. T. H. Suffern, Dr. I. Sanderson, Mr. C. E. W. Foster and Mr. V. Harris.

NOTES ON SPECIES.

In my previous reports I have devoted a section to the detailing of locations and breeding places of the various species, in addition to mentioning these under the investigations in which they were collected. As this information can be obtained in the various sections of the full report, and as a card index containing particulars of distribution, host, habitation, etc., is being compiled from information as it accumulates, this section will henceforth be confined to mentioning those species which I have not found previously in the Territory, along with any corrections necessary to previous determinations. When, in course of time, the card index is considered sufficiently complete it is hoped to publish notes on distribution of the various species throughout the Territory accompanied by maps.

The following notes on various species are given:—

Aedomyia furfurea, Enderlein: This species was given by Mr. Edwards* as a synonym of *A. venustipes*, Skuse. On examining specimens, sent for confirmation as this latter species, however, he decided that the two species were distinct(†)

A. venustipes of my last report should thus read *A. furfurea*.

Aedes pseudonigeria, Theobald: Specimens stated in my last report to belong to the species *A. solatus*, Edwards have been examined by Mr. Edwards who states that they are not of that species. He is of the opinion that they may be a variety of *A. pseudenigeria*, there being one similar specimen in the British Museum collection.

Anopheles machardyi, Edwards: Since writing my last report I had access to the original description of *A. natalensis*, Hill and Haydon.‡ This description showed that the specimens from Amani, which were determined from keys as such, were not of this species; they agreed more closely with *A. ardensis*, Pewer.§ I submitted them to the Imperial Institute of Entomology as a probable new variety of this species, of which I have not seen a specimen, or a probable new species. Mr. Edwards, to whom the specimens were submitted described them as a new species under the above name.* The larvæ resembles that of *A. ardensis* as described by Hill and Haydon.† The most obvious difference being in the posterior frontal hair, which, however, is stated in the description to be subject to variation.

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*Bull. Ento. Res., Vol. XV, p. 262. †Bull. Ento. Res., Vol. XX, p. 325.

‡ Ann. Natal Mus., Vol. 1, p. 152. § Ann. Natal Mus., Vol. 1, p. 137.

Aedes (Aedimorphus) minutus, Theobald: The specimen referred to on page 51 of my last report as a probable new species closely related to *A. minutus* has been assumed to be an individual variant of this species as no others agreeing with it have been found.

Culex vansomereni, Edwards: The single female specimen referred to on page 50 of my last report has been stated by Mr. Edwards probably to belong to this species.

Culex scotti, Theobald: The four female specimens referred to on page 46 of my last report have been stated by Mr. Edwards probably to belong to this species.

Eretmopodites chrysogaster, Graham; var. *subsimplicipes*, Edwards: Specimens apparently different from others in my collection of *E. chrysogaster* were sent to the Imperial Institute of Entomology, and have been determined by Mr. Edwards as the variety *subsimplicipes*. These specimens were collected as larvæ in a tank at Mombo.

Aedes (Stegomyia) africanus, Theobald: This species was found breeding in a road pool and in the cup of a cut bamboo at Bukoba.

Aedes (Stegomyia) apicoargenteus, Theobald: This species was sent to me from Bukoba, the larvæ being collected from a pool, tree-hole, kerosene tin, small tin, cup in cut bamboo.

Aedes (Aedimorphus) argenteopunctatus, Theobald: Larvæ of this species were found in rain pools between sweet-potato beds at Bukoba.

Aedes (Stegomyia) vittatus, Bigot: Larvæ of this species were collected in rain water in a rock hole at Mwanza.

Anopheles nili, Theobald: Larvæ of this species were taken among grass at the edge of the river at Kilosa. They were very scarce, only two being found.

Anopheles pharœnsis, Theobald: Larvæ of this species were collected among floating grass at the edge of the lake at Mwanza. Female imagines also were collected in neighbouring houses.

Anopheles transvaalensis, Carter: Larvæ of this species were collected in pools and backwaters of a small river crossing the Kilosa-Mahenge Road at about eighty-seven miles from Kilosa.

Culex laurenti, Newstead: Larvæ of this species were collected from a rain pool in a rubbish dump at Mwanza.

Mimomyia plumosa, Theobald: A single larva of this species was collected from a pool on the foreshore at Bukoba.

Mucidus mucidus, Karsch: One female imago was caught in an outhouse at Bukoba.

Tæniorhynchus (Coquillettidia) aurites, Theobald: One pupa, which hatched out to this species, was collected on the edge of the lake at Mwanza.

Tæniorhynchus (Coquillettidia) cristatus, Theobald: One female imago of this species was caught in the government rest house at Bukoba.

Tæniorhynchus (Coquillettidia) metalicus, Theobald: One specimen of this species was collected as a pupa at the edge of the lake at Mwanza.

Uranotænia mashonœnsis, Theobald: A larva of this species was collected in the Kisumbuguru River where it crosses the Kilosa-Mahenge Road.

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*Ann. Natal Mus., Vol. 1, p. 138. †Bull. Ento. Res., Vol. XXI, p. 545.

NOTE ON THE DISTRIBUTION OF *Aedes Argenteus*.

The opinion has been expressed that this species is confined to the coastal parts of tropical East Africa. This is not the case. Up to the present I have found it at Tanga, Muhesa, Mnyusi, Korogwe and Mombo on the Tanga Line; and at Dar es Salaam, Morogoro and Kilosa on the Central Line; also at Mwanza and Bukoba on Lake Victoria. The breeding of this species is still profuse. It is the important carrier of yellow fever on the West Coast. As I pointed out in my report for 1926, far-eastern countries are looking with concern to the possibility of the spread of yellow fever from West Africa to their territories, by way of East Africa. In view of the present tendency to more rapid transport, I would again draw attention to pages 69 and 70 in the Laboratory Report for 1926.

CHEMICAL WORK.

Since the Analytical Chemist went on leave in September I have undertaken a certain amount of the less complicated chemical work. The large majority of this consisted in the analyses of milks, of which two hundred and sixty have been from the Veterinary Department, about twenty from the Health Office, and one or two human milks from the hospital. Other work comprised water content of two soaps, examination of materials for cyanide in a poisoning case, and a series of blood-sugar estimations.

ACKNOWLEDGMENT.

I wish to acknowledge with thanks the valuable assistance of the Imperial Institute of Entomology, and of Mr. F. W. Edwards, of the British Museum, in the determination of certain species and in the checking of other determinations.

TABLE 1.—STAFF.

List of Medical Staff and Principal Members of Subordinate Staff not printed.

PRINCIPAL CHANGES:

TRANSFERS.

European.

Mr. P. W. Morgan, Building Inspector, to Township Authority, Dar es Salaam, 1st April.

LEAVE OF ABSENCE.

European.

Dr. J. Pugh, Deputy Director of Medical Service, beginning of the year till 19th January.
Dr. P. A. Clearkin, Deputy Director of Laboratory Service, 5th January till 23rd November.
Dr. H. J. O'D. Burke-Gaffney, Assistant Bacteriologist, 14th December till end of the year.
Mr. W. Whitley, Analytical Chemist, 26th August till end of the year.
Dr. T. H. Suffern, Senior Medical Officer, 1st December till end of the year.
Dr. C. L. Ievers, Senior Medical Officer, 7th May till 2nd December.
Dr. R. Nixon, Senior Health Officer, 15th January till 1st September.
Dr. H. H. B. Follit, Senior Health Officer, 7th December till end of the year.
Dr. A. I. Meek, Senior Health Officer, beginning of the year till 22nd May.
Dr. C. H. Philips, Medical Officer, beginning of the year till 16th February.
Dr. G. A. Williams, Medical Officer, beginning of the year till 7th July.
Dr. W. H. Dye, Medical Officer, 28th October till end of the year.
Dr. C. F. Shelton, Medical Officer, 5th January till 29th September.
Dr. J. J. B. Edmond, Medical Officer, 6th April till 26th October.
Dr. A. R. Lester, Medical Officer, 28th July till end of the year.
Dr. W. K. Connell, Medical Officer, beginning of the year till 11th September.
Dr. F. R. Lockhart, Medical Officer, beginning of the year till 14th August.
Dr. D. V. Latham, Medical Officer, 24th February till 21st December.
Dr. T. Langan, Medical Officer, 24th December till end of the year.
Dr. H. Fairbairn, Medical Officer, beginning of the year till 11th June.
Dr. J. Williamson, Medical Officer, 23rd May till end of the year.
Dr. C. R. Steel, Medical Officer, 1st February till 1st September.
Dr. R. C. Speirs, Medical Officer, 6th November till end of the year.
Dr. R. Mackay, Medical Officer, 28th July till end of the year.
Dr. B. O. Wilkin, Medical Officer, 17th August till end of the year.
Dr. B. A. Coghlan, Medical Officer, beginning of the year till 2nd March.
Dr. J. Harkness, Medical Officer, 1st March till end of the year.
Dr. M. Harvey Clarke, Medical Officer, beginning of the year till 1st October.
Dr. C. Wilcocks, Medical Officer, 9th March till 23rd November.
Dr. S. E. Theis, Medical Officer, beginning of the year till 11th September.
Dr. C. J. MacQuillan, Medical Officer, beginning of the year till 18th June.
Dr. A. V. Clemmey, Medical Officer, 19th November till end of the year.
Dr. D. E. Wilson, Medical Officer, 10th July till end of the year.
Dr. J. B. C. Madge, Medical Officer, 15th November till end of the year.
Dr. F. V. Adams, Medical Officer, 3rd September till end of the year.
Dr. K. Edmundson, Medical Officer, 18th November till end of the year.
Mr. A. S. Newton, Dental Surgeon, 23rd June till end of the year.
Miss F. M. Plant, Matron, 14th December till end of the year.
Miss J. Fraser, Senior Nursing Sister, beginning of the year till 23rd March.
Miss M. Donald, Senior Nursing Sister, 15th May till 23rd November.
Miss E. L. Kemsley, Senior Health Visitor, 24th December till end of the year.
Miss B. G. Allardes, Senior Health Visitor, beginning of the year till 13th October.
Miss A. L. Ryder, Sister and Health Visitor, 7th December till end of the year.
Miss M. B. Craig, Sister and Health Visitor, 8th November till end of the year.

Miss A. A. Howorth, Sister and Health Visitor, 19th October till end of the year.
Miss K. P. Heckford, Nursing Sister, beginning of the year till 3rd January.
Miss J. D. Leighton, Nursing Sister, beginning of the year till 15th February.
Miss R. V. G. Daye, Nursing Sister, beginning of the year till 17th April.
Miss J. L. Vaux, Nursing Sister, 1st February till 31st August.
Miss B. Eager, Nursing Sister, 3rd September till end of the year.
Miss J. Turnbull, Nursing Sister, 24th December till end of the year.
Miss M. C. Ferguson, Nursing Sister, 22nd June till end of the year.
Mr. H. L. Lachlan, Clerk, beginning of the year till 9th June.
Mr. C. N. Rowe, Senior Sanitary Superintendent, 9th February till 1st October.
Mr. W. A. Moore, Senior Sanitary Superintendent, beginning of the year till 25th August.
Mr. W. M. Mackay, Sanitary Superintendent, beginning of the year till 4th January.
Mr. B. T. Bailey, Sanitary Superintendent, beginning of the year till 23rd February.
Mr. H. L. Bolton, Sanitary Superintendent, 9th March till 11th September.
Mr. C. Harlen, Sanitary Superintendent, 24th December till end of the year.
Mr. A. Hume, Sanitary Superintendent, 8th November till end of the year.
Mr. H. J. Rance, Sanitary Superintendent, 22nd June till end of the year.
Mr. A. S. Murdison, Sanitary Superintendent, beginning of the year till 19th January.
Mr. J. Spittles, Superintendent, Mental Hospital, 5th May till 3rd December.
Mrs. C. M. Spittles, Matron, Mental Hospital, 5th May till 3rd December.

Asiatic.

Mr. B. G. Pandit, Assistant Surgeon, 24th November till end of the year.
Mr. Y. L. Moole, Senior Sub-Assistant Surgeon, 4th March till 25th August.
Mr. G. V. Sakrikar, Sub-Assistant Surgeon, 16th September till end of the year.
Mr. B. K. Christian, Sub-Assistant Surgeon, beginning of the year till 10th February
Mr. M. P. Dave, Sub-Assistant Surgeon, 2nd December till end of the year.
Mr. T. M. Joseph, Sub-Assistant Surgeon, 15th October till end of the year.
Mr. C. K. Desai, Sub-Assistant Surgeon, beginning of the year till 15th June.
Mr. M. B. Pandya, Sub-Assistant Surgeon, 29th September till end of the year.
Mr. Sant Ram, Sub-Assistant Surgeon, 12th May till 22nd September.
Mr. Harcharan Singh, Sub-Assistant Surgeon, beginning of the year till 10th February
Mr. S. W. Gupte, Sub-Assistant Surgeon, beginning of the year till 15th June.
Mr. Basant Singh, Sub-Assistant Surgeon, 4th March till 25th August.
Mr. P. R. Dhavle, Sub-Assistant Surgeon, 24th November till end of the year.
Mr. G. K. Khot, Sub-Assistant Surgeon, beginning of the year till 26th January.
Mr. M. G. Panvalkar, Sub-Assistant Surgeon, 7th January till 20th April.
Mr. G. V. Harichandrakar, Sub-Assistant Surgeon, 22nd July till end of the year.
Mr. J. K. Dave, Sub-Assistant Surgeon, 29th April till 17th October.
Mr. P. K. Date, Sub-Assistant Surgeon, 16th September till end of the year.
Mr. V. V. Apte, Sub-Assistant Surgeon, beginning of the year till 10th February.
Mr. V. S. Kanitkar, Sub-Assistant Surgeon, 14th November till end of the year.
Mr. K. V. Ananthakrishnan, Sub-Assistant Surgeon, 4th February till 18th May.
Mr. N. C. Daniel, Sub-Assistant Surgeon, 10th December till end of the year.
Mr. S. S. Nadkarni, Sub-Assistant Surgeon, 10th December till end of the year.
Mr. J. C. X. Rodrigues, Compounder, beginning of the year till 2nd May.
Mr. E. Dias, Compounder, 22nd January till 13th July.
Mr. M. M. Dass, Compounder, 2nd December till end of the year.
Mr. Ahmed Din, Compounder, 25th July till end of the year.
Mr. Dasumal, Compounder, 29th September till end of the year.
Mr. Gurdit Singh, Compounder, 4th August till end of the year.
Mr. C. Vaz, Compounder, beginning of the year till 7th April.
Mr. M. A. Vaishnav, Compounder, beginning of the year till 26th January.
Mr. A. E. L. Fernandes. Compounder, beginning of the year till 15th June.
Mr. S. P. Dube, Compounder, 4th August till end of the year.
Mr. Khushal Khan, Compounder, 17th March till 30th October.
Mr. Y. N. Bhingarde, Compounder, 1st September till end of the year.
Mr. K. C. Karpal, Compounder, 27th October till end of the year.
Mr. Joe de Sousa, 1st Grade Clerk, beginning of the year till 20th April.

Mr. J. B. da Cunha, 2nd Grade Clerk, beginning of the year till 7th April.
Mr. E. D'Mello, 2nd Grade Clerk, 27th October till end of the year.
Mr. P. D'Mello, 3rd Grade Clerk, 17th March till 22nd September.
Mr. E. C. Rebello, 3rd Grade Clerk, 22nd July till end of the year.
Mr. R. D. Pandya, 3rd Grade Clerk, 24th November till end of the year.
Mr. C. R. Sharma, Sanitary Inspector, 4th March till 5th October.

TABLE II.—FINANCIAL.

	£	£
Expenditure:—		
PERSONAL EMOLUMENTS:		
Medical Division:		
Director of Medical and Sanitary Services	2,700	
Deputy Director of Medical Service		
Clerical Staff, Medical Storekeepers, Medical Instructors, Packers, Messengers, etc.	8,608	
Senior Medical Officers	6,408	
Medical Officers	36,264	
Sleeping Sickness Officer	1,100	
Dental Surgeons and Dental Mechanic	2,462	
Nursing Staff	11,061	
Superintendent and Matron, Mental Hospital	852	
Asian Medical Assistants, i.e. Assistant Surgeon, Senior Sub-Assistant Surgeons, Sub-Assistant Surgeons and Compounders	24,920	
African Dispensers, Hospital Orderlies and Nurses ...	12,315	
Other Charges	3,195	
		109,885
Sanitation Division:		
Deputy Director of Sanitary Service and Senior Health Officers	6,900	
Sisters and Health Visitors, Sanitary Superintendents and Subordinate Staff for the suppression of Epidemic Diseases	23,945	
		30,845
Laboratory Division:		
Deputy Director of Laboratory Service, Assistant Bacteriologist, Entomologist, Analytical Chemist, Laboratory Assistants and other personnel attached	4,745	
		4,745
TOTAL PERSONAL EMOLUMENTS ...		145,475
OTHER CHARGES:		
Administrative Division:	£	
Incidental Expenses	353	
Medical Division:		
Miscellaneous Charges	5,742	
Sanitation Division:		
Sanitary Equipment	1,104	
,, Labour	15,183	
,, Oils and Disinfectants	481	
Uniforms	445	
Laboratory Division:		
Vaccines and Sera	421	
Miscellaneous	455	

	£	£
Preventable Diseases, etc.:		
Epidemic Outbreaks and Special Sanitary Measures	585	
Leprosy and Incurables	4,051	
Maternity and Child Welfare	2,896	
Quarantine and Infectious Diseases Hospitals	1,447	
Quinine for Public Purchase at Post Offices	1,099	
Sleeping Sickness	13,101	
Tuberculosis	694	
Ankylostomiasis	840	
Venereal Diseases and Yaws	433	
Hospitals, Dispensaries and Mental Hospitals:		
Maintenance of:		
Equipment, Furniture, Microscopes, etc.	8,839	
Medical and Surgical Stores	18,075	
Upkeep of Hospitals	16,132	
,, Mental Hospitals	1,463	
Uniforms	445	
Miscellaneous:		
Books of Reference, Periodicals and Stationery	705	
Travelling and Transport:		
Box Bodies for Ambulances	59	
Drivers	222	
Motor Vehicles	3,100	
Travelling Equipment	394	
Transport, Railage and Passages	24,634	
Upkeep of Motor Boats	400	
Upkeep and Running Costs of Cars	456	
Research Scheme Trypanosome Rhodesiense	2,896	
TOTAL OTHER CHARGES ...	127,150	127,150
SPECIAL INVESTIGATION INTO MEDICAL AND SOCIAL CONDITIONS, KAHAMA.		
Personal Emoluments:		
1 Medical Officer	617	
2 Sisters and Health Visitors	584	
4 Sub-Assistant Surgeons	644	
2 Motor Drivers	37	
20 Ayahs (Native Female Nurses)	208	
TOTAL EXPENDITURE ...	2,090	2,090
TOTAL ...		274,715

STATEMENT OF REVENUE, 1930:

Receipts:	£
From Hospital Fees, Sale of Drugs, etc.	11,150
Fees collected by Port and Marine Department and H.M. Customs for Bills of Health	1,401
Sale of Lymph, Vaccine and Serum	635
TOTAL ...	13,186

TABLES III AND IV.—STATISTICS.

Not available.

TABLES V AND VI.

EUROPEANS (OFFICIAL AND NON-OFFICIAL).

RETURN OF DISEASES AND DEATHS (IN-PATIENTS) AND OF DISEASES (OUT-PATIENTS) FOR THE YEAR 1930.

DISEASES	In-Patients					Out-Patients			Total Cases In- and Out-Patients
	Remaining in Hospitals at the end of 1929	Yearly Total		Total Cases Treated	Remaining in Hospitals at the end of 1930	Males	Females	Total	
		Admissions	Deaths						
I.—Epidemic, Endemic, and Infectious Diseases.									
1. Enteric Group—									
(a) Typhoid fever ...	2	7	1	9	1	—	—	—	9
(b) Paratyphoid A ...	1	2	—	3	—	—	—	—	3
(c) Paratyphoid B ...	—	1	—	1	—	—	—	—	1
(d) Type not defined ...	—	2	—	2	1	—	—	—	2
2. Typhus	—	—	—	—	—	—	—	—	—
3. Relapsing fever ...	—	14	—	14	—	1	—	1	15
4. Undulant ,, ...	—	—	—	—	—	—	—	—	—
5. Malaria—									
(a) Tertian	2	120	—	122	—	18	13	31	153
(b) Quartan	—	—	—	—	—	3	—	3	3
(c) Aestivo-autumnal ...	2	525	1	527	5	161	74	235	762
(d) Cachexia	—	30	1	30	—	11	4	15	45
(e) Blackwater	—	19	8	19	—	—	—	—	19
(f) Unclassified	1	37	—	38	—	19	10	29	67
(g) Cerebral	—	5	4	5	—	—	—	—	5
6. Smallpox	—	1	—	1	—	—	—	—	1
Alastrim	—	—	—	—	—	—	—	—	—
7. Measles	—	4	—	4	—	—	—	—	4
8. Scarlet fever	—	—	—	—	—	—	—	—	—
9. Whooping cough ...	—	4	—	4	—	—	—	—	4
10. Diphtheria	—	1	—	1	—	—	—	—	1
11. Influenza	4	213	—	217	1	92	63	155	372
12. Miliary fever	—	—	—	—	—	—	—	—	—
13. Mumps	—	2	—	2	—	—	—	—	2
14. Cholera	—	—	—	—	—	—	—	—	—
15. Epidemic diarrhœa ...	—	—	—	—	—	—	—	—	—
16. Dysentery—									
(a) Amœbic	—	29	—	29	—	21	8	29	58
(b) Bacillary	—	6	—	6	—	—	1	1	7
(c) Undefined or due to other causes ...	—	6	—	6	—	7	—	7	13
17. Plague—									
(a) Bubonic	—	—	—	—	—	—	—	—	—
(b) Pneumonic	—	—	—	—	—	—	—	—	—
(c) Septicæmic	—	—	—	—	—	—	—	—	—
(d) Undefined	—	—	—	—	—	—	—	—	—
18. Yellow fever	—	—	—	—	—	—	—	—	—
19. Spirochætosis ictero-hæmorrhagica	—	—	—	—	—	—	—	—	—
20. Leprosy...	—	—	—	—	—	—	—	—	—
21. Erysipelas	—	2	—	2	—	2	1	3	5
22. Acute polio-myelitis	—	—	—	—	—	—	—	—	—
23. Encephalitis lethargica	—	—	—	—	—	—	—	—	—
24. Epidemic cerebro-spinal fever	—	1	1	1	—	—	—	—	1
25. Other epidemic diseases–									
(a) Rubeola (German Measles)	—	—	—	—	—	—	—	—	—
(b) Varicella (chickenpox)	—	4	—	4	—	—	—	—	4
(c) Kala Azar	—	—	—	—	—	—	—	—	—
(d) Phlebotomus fever ...	—	—	—	—	—	—	—	—	—
(e) Dengue	—	3	—	3	—	1	—	1	4
(f) Epidemic dropsy ...	—	—	—	—	—	—	—	—	—
(g) Yaws	—	—	—	—	—	—	—	—	—
(h) Trypanosomiasis ...	—	1	—	1	—	—	—	—	1
26. Glanders	—	—	—	—	—	—	—	—	—

TABLES V and VI—*continued.*

Europeans (Official and Non-Official).

Return of Diseases and Deaths (In-Patients) and of Diseases (Out-Patients) for the Year 1930—*continued.*

DISEASES	In-Patients					Out-Patients			Total Cases In- and Out-Patients
	Remaining in Hospitals at the end of 1929	Yearly Total		Total Cases Treated	Remaining in Hospitals at the end of 1930	Males	Females	Total	
		Admissions	Deaths						
27. Anthrax	—	—	—	—	—	—	—	—	—
28. Rabies	—	—	—	—	—	—	—	—	—
29. Tetanus...	—	—	—	—	—	—	—	—	—
30. Mycosis	—	—	—	—	—	—	—	—	—
31. Tuberculosis, pulmonary and laryngeal	—	8	2	8	—	2	1	3	11
32. Tuberculosis of the meninges or cerebral nervous system	—	—	—	—	—	—	—	—	—
33. Tuberculosis of the Intestines or peritoneum...	—	—	—	—	—	—	—	—	—
34. Tuberculosis of the vertebral column	—	—	—	—	—	—	—	—	—
35. Tuberculosis of bones and joints...	—	—	—	—	—	—	—	—	—
36. Tuberculosis of other organs—									
(a) Skin or subcutaneous tissue lupus	—	—	—	—	—	—	—	—	—
(b) Bones	—	—	—	—	—	—	—	—	—
(c) Lymphatic system ...	—	—	—	—	—	—	—	—	—
(d) Genito-urinary ...	—	1	—	1	—	1	—	1	2
(e) Other organs	—	—	—	—	—	—	—	—	—
37. Tuberculosis disseminated—									
(a) Acute	—	—	—	—	—	—	—	—	—
(b) Chronic	—	—	—	—	—	—	—	—	—
38. Syphilis—									
(a) Primary	—	1	—	1	—	6	—	6	7
(b) Secondary	—	—	—	—	—	6	—	6	6
(c) Tertiary	—	2	—	2	—	1	1	2	4
(d) Hereditary	—	—	—	—	—	—	—	—	—
(e) Period not indicated	—	—	—	—	—	3	—	3	3
39. Soft chancre	—	—	—	—	—	1	—	1	1
40. A.—Gonorrhœa and its complications ...	—	4	—	4	—	31	3	34	38
B.—Gonorrhœal ophthalmia	—	—	—	—	—	—	—	—	—
C.—Gonorrhœal arthritis	—	1	—	1	—	—	—	—	1
D.—Granuloma venereum	—	—	—	—	—	—	—	—	—
41. Septicæmia	—	—	—	—	—	—	—	—	—
42. Other infectious diseases	—	—	—	—	—	—	—	—	—
II.—General Diseases not mentioned above.									
43. Cancer or other malignant Tumours of the Buccal Cavity	—	—	—	—	—	—	—	—	—
44. Cancer or other malignant Tumours of the Stomach or Liver ...	—	1	—	1	—	—	—	—	1
45. Cancer or other malignant Tumours of the Peritoneum, Intestines or Rectum	—	1	—	1	—	1	1	2	3
46. Cancer or other malignant Tumours of the Female Genital Organs ...	—	—	—	—	—	—	—	—	—

TABLES V AND VI—*continued.*

EUROPEANS (OFFICIAL AND NON-OFFICIAL).

RETURN OF DISEASES AND DEATHS (IN-PATIENTS) AND OF DISEASES (OUT-PATIENTS) FOR THE YEAR 1930—*continued.*

DISEASES	In-Patients					Out-Patients			Total Cases In- and Out-Patients
	Remaining in Hospitals at the end of 1929	Yearly Total		Total Cases Treated	Remaining in Hospitals at the end of 1930	Males	Females	Total	
		Admissions	Deaths						
47. Cancer or other malignant Tumours of the Breast	—	—	—	—	—	—	—	—	—
48. Cancer or other malignant Tumours of the Skin	—	—	—	—	—	2	—	2	2
49. Cancer or other malignant Tumours of Organs not specified	—	—	—	—	—	2	1	3	3
50. Tumours non-malignant	—	—	—	—	—	5	4	9	9
51. Acute Rheumatism ...	—	1	—	1	—	2	1	3	4
52. Chronic Rheumatism ...	—	9	—	9	—	22	6	28	37
53. Scurvy including Barlow's Disease ...	—	—	—	—	—	—	—	—	—
54. Pellagra	—	—	—	—	—	—	—	—	—
55. Beri-beri	—	—	—	—	—	—	—	—	—
56. Rickets	—	—	—	—	—	—	—	—	—
57. Diabetes (not including Insipidus	—	4	—	4	—	3	3	6	10
58. Anæmia—									
(a) Pernicious	—	2	—	2	—	—	—	—	2
(b) Other Anæmias and Chlorosis	—	1	—	1	—	9	15	24	25
59. Diseases of the Pituitary Body	—	1	—	1	—	—	—	—	1
60. Diseases of the Thyroid Gland—									
(a) Exophthalmic Goitre	—	—	—	—	—	—	—	—	—
(b) Other Diseases of the Thyroid Gland, Myxœdema	—	1	—	1	—	—	1	1	2
61. Diseases of the Para-Thyroid Glands	—	—	—	—	—	—	—	—	—
62. Diseases of the Thymus	—	—	—	—	—	—	—	—	—
63. Diseases of the Supra-Renal Glands	—	—	—	—	—	—	—	—	—
64. Diseases of the Spleen	—	—	—	—	—	3	1	4	4
65. Leukœmia—									
(a) Leukæmia	—	—	—	—	—	—	—	—	—
(b) Hodgkin's Disease ...	—	—	—	—	—	—	—	—	—
66. Alcoholism	—	4	—	4	—	1	—	1	5
67. Chronic poisoning by mineral substance (lead, mercury, etc.)	—	—	—	—	—	—	—	—	—
68. Chronic poisoning by organic substance (morphia, cocaine, etc.) ...	—	—	—	—	—	—	—	—	—
69. Other general diseases—									
Auto-intoxication ...	—	—	—	—	—	—	—	—	—
Purpura-hæmorrhagica ...	—	—	—	—	—	—	—	—	—
Hæmophilia	—	—	—	—	—	—	—	—	—
Diabetes Insipidus ...	—	—	—	—	—	—	—	—	—
Other general diseases ...	—	1	—	1	—	1	1	2	3
III.—Affections of the Nervous System and Organs of the Senses.									
70. Encephalitis (not includ- Encephalitis Lethargica)	—	—	—	—	—	—	—	—	—
71. Meningitis (not including Tuberculous Meningitis or Cerebro-spinal Meningitis)	—	1	1	1	—	—	—	—	1

TABLES V AND VI—*continued.*

EUROPEANS (OFFICIAL AND NON-OFFICIAL).

RETURN OF DISEASES AND DEATHS (IN-PATIENTS) AND OF DISEASES (OUT-PATIENTS) FOR THE YEAR 1930—*continued.*

DISEASES	In-Patients					Out-Patients			Total Cases In- and Out-Patients
	Remaining in Hospitals at the end of 1929	Yearly Total		Total Cases Treated	Remaining in Hospitals at the end of 1930	Males	Females	Total	
		Admissions	Deaths						
72. Locomotor Ataxia ...	1	—	—	1	—	—	—	—	1
73. Other affections of the Spinal Cord	—	—	—	—	—	—	—	—	—
74. Apoplexy—	—	—	—	—	—	—	—	—	—
(a) Hemiplegia	—	—	—	—	—	—	—	—	—
(b) Embolism	—	—	—	—	—	—	—	—	—
(c) Thrombosis	—	1	1	1	—	—	—	—	1
75. Paralysis—									
(a) Hæmorrhage	—	3	1	3	—	—	—	—	3
(b) Other Paralysis ...	—	1	—	1	—	1	1	2	3
76. General Paralysis of the Insane	—	—	—	—	—	—	—	—	—
77. Other forms of Mental Alienation	—	3	—	3	—	—	1	1	4
78. Epilepsy	—	1	—	1	—	2	—	2	3
79. Eclampsia, convulsions (non-puerperal) five years and over	—	—	—	—	—	—	—	—	—
80. Infantile convulsions ...	—	1	—	1	—	—	—	—	1
81. Chorea	—	—	—	—	—	—	—	—	—
82. A.—Hysteria	—	5	—	5	—	2	4	6	11
B.—Neuritis	—	7	1	7	—	13	5	18	25
C.—Neurasthenia ...	—	18	—	18	2	11	15	26	44
83. Cerebral softening ...	—	—	—	—	—	—	—	—	—
84. Other affections of the Nervous System, such as Paralysis Agitans ...	—	2	—	2	—	2	1	3	5
85. Affections of the Organs of Vision—									
(a) Diseases of the eye ...	—	—	—	—	—	1	—	1	1
(b) Conjunctivitis ...	—	7	—	7	—	35	11	46	53
(c) Trachoma	—	1	—	1	—	7	—	7	8
(d) Tumours of the eye ...	—	—	—	—	—	3	2	5	5
(e) Other affections of the eye	—	7	—	7	—	43	22	65	72
86. Affections of the ear or Mastoid Sinus	—	3	—	3	—	90	18	108	111
IV.—Affections of the Circulatory System.									
87. Pericarditis	—	—	—	—	—	—	—	—	—
88. Acute Endocarditis or Myocarditis	—	1	—	1	—	—	—	—	1
89. Angina Pectoris ...	—	1	—	1	—	1	1	2	3
90. Other diseases of the Heart—									
(a) Valvular	—	4	—	4	—	5	2	7	11
Mitral	—	3	1	3	—	—	—	—	3
Aortic	—	1	—	1	—	1	4	5	6
Tricuspid	—	—	—	—	—	—	—	—	—
Pulmonary	—	—	—	—	—	1	1	2	2
(b) Myocarditis	—	2	—	2	—	3	3	6	8
91. Diseases of the Arteries—									
(a) Aneurism	—	—	—	—	—	—	—	—	—
(b) Arterio-Sclerosis ...	—	3	—	3	—	2	—	2	5
(c) Other diseases ...	—	—	—	—	—	—	—	—	—
92. Embolism or Thrombosis (non-cerebral)	—	—	—	—	—	—	—	—	—

TABLES V AND VI—*continued.*

EUROPEANS (OFFICIAL AND NON-OFFICIAL).

RETURN OF DISEASES AND DEATHS (IN-PATIENTS) AND OF DISEASES (OUT-PATIENTS) FOR THE YEAR 1930—*continued.*

DISEASES	In-Patients					Out-Patients			Total Cases In- and Out-Patients
	Remaining in Hospitals at the end of 1929	Yearly Total		Total Cases Treated	Remaining in Hospitals at the of end of 1930	Males	Females	Total	
		Admissions	Deaths						
93. Diseases of the Veins—									
Hæmorrhoids	—	3	—	3	1	13	4	17	20
Varicose	—	3	—	3	—	3		3	6
Phlebitis	—	4	—	4	2	—	—	—	4
94. Diseases of the Lymphatic System—									
Filariasis	—	—	—	—	—	—	—	—	—
Lymphangitis	—	3	—	3	—	10	3	13	16
Lymphadenitis, Bubo (non-specific)	—	3	—	3	—	1	2	3	6
95. Hæmorrhage of undetermined cause	—	—	—	—	—	—	—	—	—
96. Other affections of the Circulatory System ...	—	2	—	2	—	6	4	10	12
V.—Affections of the Respiratory System.									
97. Diseases of the Nasal Passages—									
Adenoids	—	2	—	2	—	3	2	5	7
Polypus	—	—	—	—	—	—	—	—	—
Rhinitis	—	—	—	—	—	9	3	12	12
Coryza	—	39	—	39	—	44	17	61	100
98. Affections of the Larynx—									
Laryngitis	—	6	—	6	—	20	7	27	33
99. Bronchitis—									
(a) Acute	—	36	—	36	—	46	23	69	105
(b) Chronic	—	3	—	3	—	13	1	14	17
(c) Unclassified	—	3	—	3	—	5	5	10	13
100. Broncho-pneumonia ...	—	6	1	6	—	—	—	—	6
101. Pneumonia—									
(a) Lobar	—	5	—	5	1	2	—	2	7
(b) Unclassified	—	2	—	2	—	—	—	—	2
102. Pleurisy, Empyema ...	—	4	—	4	—	1	—	1	5
103. Congestion of the Lungs	—	—	—	—	—	1	1	2	2
104. Gangrene of the Lungs	—	—	—	—	—	—	—	—	—
105. Asthma	—	5	—	5	—	8	5	13	18
106. Pulmonary Emphysema	—	2	1	2	—	—	—	—	2
107. Other affections of the Lungs—									
Pulmonary Spirochætosis	1	1	—	2	—	3	1	4	6
Other affections of the Respiratory System ...	—	—	—	—	—	—	—	—	—
VI.—Diseases of the Digestive System.									
108. A.—Diseases of Teeth or Gums—									
Caries, Pyorrhœa, etc.	—	17	—	17	—	92	29	121	138
B.—Other affections of the mouth—									
Stomatitis, Glossitis, etc.	—	12	—	12	—	13	8	21	33
109. Affections of the Pharynx or Tonsils—									
Tonsillitis, Pharyngitis ...	1	65	1	66	1	68	40	108	174
110. Affections of the Œsophagus	—	—	—	—	—	1	—	1	1

TABLES V AND VI—*continued.*

EUROPEANS (OFFICIAL AND NON-OFFICIAL).

RETURN OF DISEASES AND DEATHS (IN-PATIENTS) AND OF DISEASES (OUT-PATIENTS) FOR THE YEAR 1930—*continued.*

DISEASES	In-Patients					Out-Patients			Total Cases In- and Out-Patients
	Remaining in Hospitals at the end of 1929	Yearly Total		Total Cases Treated	Remaining in Hospitals at the end of 1930	Males	Females	Total	
		Admissions	Deaths						
111. A.—Ulcer of the Stomach	—	1	—	1	—	—	1	1	2
B.—Ulcer of the Duodenum	—	3	—	3	—	2	—	2	5
112. Other affections of the Stomach—									
Gastritis, Dyspepsia, etc.	—	36	—	36	—	61	33	94	130
113. Diarrhœa and Enteritis—									
Under two years ...	—	24	—	24	—	20	15	35	59
114. Diarrhœa and Enteritis—									
Two years and over ...	—	55	—	55	—	40	30	70	125
Colitis	—	5	—	5	—	5	1	6	11
Ulceration	—	—	—	—	—	—	—	—	—
114A. Sprue...	—	—	—	—	—	—	—	—	—
115. Ankylostomiasis ...	—	—	—	—	—	—	2	2	2
116. Diseases due to Intestinal Parasites—									
(a) Cestoda (Tænia) ...	—	4	—	4	—	2	4	6	10
(b) Trematoda (Flukes)	—	—	—	—	—	—	—	—	—
(c) Nematoda (other than Ankylostoma)	—	—	—	—	—	—	—	—	—
Ascaris	—	1	—	1	—	2	2	4	5
Trichocephalus dispar	—	—	—	—	—	—	—	—	—
Trichina	—	—	—	—	—	—	—	—	—
Dracunculus	—	—	—	—	—	—	—	—	—
Strongylus	—	—	—	—	—	—	—	—	—
Oxyuris	—	2	—	2	—	—	6	6	8
(d) Coccidia	—	—	—	—	—	—	—	—	—
(e) Other parasites ...	—	—	—	—	—	—	—	—	—
(f) Unclassified	—	3	—	3	—	—	—	—	3
117. Appendicitis	1	15	—	16	—	4	8	12	28
118. Hernia...	—	1	—	1	—	3	2	5	6
119. A.—Affections of the Anus Fistula, etc. ...	—	4	—	4	—	5	2	7	11
B.—Other affections of the Intestines—									
Enteroptosis	—	10	—	10	1	—	1	1	11
Constipation	—	5	—	5	—	23	26	49	54
120. Acute Yellow Atrophy of the Liver	—	—	—	—	—	—	—	—	—
121. Hydatid of the Liver	—	—	—	—	—	—	—	—	—
122. Cirrhosis of the Liver—									
(a) Alcoholic	—	1	1	1	—	—	—	—	1
(b) Other forms	—	—	—	—	—	—	—	—	—
123. Bacillary Calculus ...	—	1	—	1	—	—	1	1	2
124. Other affections of the Liver—									
Abscess	—	—	—	—	—	1	—	1	1
Hepatitis	—	11	—	11	—	6	—	6	17
Cholecystitis	—	7	—	7	—	2	1	3	10
Jaundice	1	8	—	9	—	1	—	1	10
125. Diseases of the Pancreas	—	1	—	1	—	—	—	—	1
126. Peritonitis (of unknown cause)	—	1	—	1	—	—	—	—	1
127. Other affections of the Digestive System ...	2	11	—	13	—	18	8	26	39

TABLES V AND VI—*continued.*

EUROPEANS (OFFICIAL AND NON-OFFICIAL).

RETURN OF DISEASES AND DEATHS (IN-PATIENTS) AND OF DISEASES (OUT-PATIENTS) FOR THE YEAR 1930—*continued.*

DISEASES	In-Patients					Out-Patients			Total Cases In- and Out-Patients
	Remaining in Hospitals at the end of 1929	Yearly Total: Admissions	Yearly Total: Deaths	Total Cases Treated	Remaining in Hospitals at the end of 1930	Males	Females	Total	
VII.—Diseases of the Genito-Urinary System (Non-Venereal)									
128. Acute Nephritis ...	—	3	1	3	—	2	—	2	5
129. Chronic Nephritis ...	—	—	—	—	—	1	1	2	2
130. A.—Chyluria	—	—	—	—	—	—	—	—	—
B.—Schistosomiasis ...	—	1	—	1	—	1	—	1	2
131. Other affections of the Kidneys—									
Pyelitis, etc.	1	11	1	12	—	5	6	11	23
132. Urinary Calculus ...	—	3	—	3	—	3	4	7	10
133. Diseases of the bladder—									
Cystitis	—	8	1	8	—	12	10	22	30
134. Diseases of the Urethra—									
(a) Stricture	—	3	—	3	—	—	2	2	5
(b) Other	—	1	—	1	—	7	—	7	8
135. Diseases of the prostate—									
Hypertrophy	—	—	—	—	—	—	—	—	—
Prostatis	—	—	—	—	—	2	—	2	2
136. Diseases (non-venereal) of the organs of man—									
Epididymitis	—	3	—	3	—	6	—	6	9
Orchitis	—	2	—	2	—	6	—	6	8
Hydrocele	—	—	—	—	—	3	—	3	3
Ulcer of Penis	—	1	—	1	—	1	—	1	2
137. Cysts or other non-malignants of the Ovaries	—	—	—	—	—	1	—	1	1
138. Salpingitis—									
Abscess of the Pelvis ...	—	2	—	2	—	—	1	1	3
139. Uterine Tumours (non-malignant)	—	—	—	—	—	—	2	2	2
140. Uterine hæmorrhage (non-puerperal)	—	1	—	1	—	—	3	3	4
141. A.—Metritis	—	2	—	2	—	—	2	2	4
B.—Other affections of the female Genital Organs ...	—	4	—	4	—	—	18	18	22
Displacement of Uterus ...	—	2	—	2	—	—	9	9	11
Amenorrhœa	—	1	—	1	—	—	9	9	10
Dysmenorrhœa	—	—	—	—	—	—	17	17	17
Leucorrhœa	—	—	—	—	—	—	3	3	3
142. Diseases of the breast (non-puerperal)—									
Mastitis	—	3	—	3	—	—	5	5	8
Abscess of the Breast ...	—	2	—	2	—	—	1	1	3
VIII.—Puerperal State.									
143. A.—Normal Labour ...	1	102	1	103	2	—	5	5	10
B.—Accidents of Pregnancy—									
(a) Abortion	—	15	1	15	—	—	2	2	1
(b) Ectopic Gestation ...	—	2	—	2	—	—	1	1	
(c) Other accidents of Pregnancy	—	7	—	7	—	—	32	32	3
144. Puerperal hæmorrhage	—	1	—	1	—	—	—	—	
145. Other accidents of Parturition	—	5	—	5	—	—	—	—	
146. Puerperal Septicæmia	—	—	—	—	—	—	1	1	
147. Phlegmasia Dolens ...	—	—	—	—	—	—	—	—	—
148. Puerperal Eclampsia ...	—	—	—	—	—	—	—	—	—
149 Sequelœ of Labour ...	—	—	—	—	—	—	2	2	

TABLES V AND VI—*continued.*

EUROPEANS (OFFICIAL AND NON-OFFICIAL).

RETURN OF DISEASES AND DEATHS (IN-PATIENTS) AND OF DISEASES (OUT-PATIENTS) FOR THE YEAR 1930—*continued.*

DISEASES	In-Patients					Out-Patients			Total Cases In- and Out-Patients
	Remaining in Hospitals at the end of 1929	Yearly Total		Total Cases Treated	Remaining in Hospitals at the end of 1930	Males	Females	Total	
		Admissions	Deaths						
150. Puerperal affections of the breast	—	—	—	—	—	—	—	—	—
IX.—Affections of the Skin and Cellular Tissues.									
151. Gangrene	—	—	—	—	—	—	1	1	1
152. Boil	—	12	—	12	2	62	20	82	94
153. Abscess Carbuncle ...	1	27	—	28	—	37	9	46	74
Whitlow	—	3	—	3	—	5	4	9	12
Cellulitis	—	22	1	22	3	21	4	25	47
Ulcer	—	19	—	19	2	69	20	89	108
154. A.—Tinea	—	1	—	1	—	24	6	30	31
B.—Scabies	—	—	—	—	—	1	—	1	1
155. Other affections of the skin—									
Erythema...	1	4	—	5	—	5	5	10	15
Urticaria	—	5	—	5	—	20	8	28	33
Eczema	—	1	—	1	—	30	4	34	35
Herpes	—	1	—	1	—	2	2	4	5
Psoriasis	—	1	—	1	—	1	—	1	2
Elephantiasis	—	—	—	—	—	—	—	—	—
Myiasis	—	—	—	—	—	16	7	23	23
Chigoes	—	1	—	1	—	6	8	14	15
Cutaneous Leishmaniasis	—	1	—	1	—	—	—	—	1
Other skin diseases ...	1	18	—	19	2	105	55	160	179
X.—Diseases of Bones and Organs of Locomotion (other than Tuberculosis).									
156. Diseases of bones—									
Osteitis	—	—	—	—	—	2	—	2	2
157. Diseases of Joints—									
Arthritis	—	2	—	2	—	4	6	10	12
Synovitis	1	12	—	13	—	5	1	6	19
158. Other diseases of Bones and Organs of Locomotion	—	7	—	7	—	38	8	46	53
XI.—Malformations.									
159. Malformations—									
Hypospadias	—	—	—	—	—	—	—	—	—
Hydrocephalus	—	—	—	—	—	—	—	—	—
Spina Bifida, etc. ...	—	—	—	—	—	—	—	—	—
XII.—Diseases of Infancy.									
160. Congenital Debility ...	—	—	—	—	—	1	—	1	1
161. Premature Birth ...	—	1	1	1	—	—	1	1	2
162. Other affections of Infancy	—	3	—	3	—	3	2	5	8
163. Infant neglect (infants of three months or over).	—	—	—	—	—	—	—	—	—
XIII.—Affections of Old Age.									
164. Senility	—	—	—	—	—	—	—	—	—
Senile Dementia	—	—	—	—	—	—	—	—	—
XIV.—Affections produced by External Causes.									
165. Suicide by poisoning...	—	—	—	—	—	—	—	—	—
166. Corrosive poisoning (intentional)	—	—	—	—	—	—	—	—	—

TABLES V AND VI—*continued.*

EUROPEANS (OFFICIAL AND NON-OFFICIAL).

RETURN OF DISEASES AND DEATHS (IN-PATIENTS) AND OF DISEASES (OUT-PATIENTS) FOR THE YEAR 1930—*continued.*

DISEASES	In-Patients					Out-Patients			Total Cases In- and Out-Patients
	Remaining in Hospitals at the end of 1929	Yearly Total		Total Cases Treated	Remaining in Hospitals at the end of 1930	Males	Females	Total	
		Admissions	Deaths						
167. Suicide by gas poisoning	—	—	—	—	—	—	—	—	—
168. Suicide by hanging or strangulation	—	—	—	—	—	—	—	—	—
169. Suicide by drowning	—	—	—	—	—	—	—	—	—
170. Suicide by firearms ...	—	—	—	—	—	—	—	—	—
171. Suicide by cutting or stabbing instruments ...	—	—	—	—	—	—	—	—	—
172. Suicide by jumping from a height	—	—	—	—	—	—	—	—	—
173. Suicide by crushing ...	—	—	—	—	—	—	—	—	—
174. Other suicides ...	—	—	—	—	—	—	—	—	—
175. Food poisoning ...	—	11	—	11	—	—	1	1	12
Botulism	—	—	—	—	—	—	—	—	—
176. Attacks of Poisonous Animals—									
Snake bite	—	—	—	—	—	2	3	5	5
Insect bite	—	2	—	2	—	5	4	9	11
Others	—	—	—	—	—	2	—	2	2
177. Other accidental poisonings	—	1	—	1	—	—	—	—	1
178. Burns (by fire) ...	—	2	—	2	—	4	5	9	11
179. Burns (other than by fire)	—	5	1	5	—	10	3	13	18
180. Suffocation (accidental)	—	—	—	—	—	—	—	—	—
181. Poisoning by gas (accidental)	—	—	—	—	—	—	—	—	—
182. Drowning (accidental)	—	—	—	—	—	—	—	—	—
183. Wounds (by firearms, war excepted)	—	6	1	6	—	2	1	3	9
184. Wounds (by cutting or stabbing instruments) ...	—	6	—	6	—	19	2	21	27
185. Wounds (by fall) ...	—	6	—	6	—	24	5	29	35
186. Wounds (in Mines or	—	1	—	1	—	—	—	—	1
quarries	—	—	—	—	—	—	—	—	—
187. Wounds (by machinery)	1	3	—	4	—	4	—	4	8
188. Wounds (crushing, *e.g.* railway accidents, etc.) ...	—	3	—	3	—	7	—	7	10
189. Injuries inflicted by animals, bites, kicks, etc.	—	3	—	3	—	13	2	15	18
190. Wounds inflicted on active service	—	—	—	—	—	—	—	—	—
191. Execution of civilians by belligerents	—	—	—	—	—	—	—	—	—
192. A.—Over fatigue ...	—	—	—	—	—	—	—	—	—
B.—Hunger or thirst ...	—	—	—	—	—	—	—	—	—
193. Exposure to cold, frost, etc.	—	—	—	—	—	—	—	—	—
194. Exposure to Heat—									
Heatstroke	—	5	—	5	—	2	—	2	7
Sunstroke	—	—	—	—	—	—	—	—	—
195. Lightning stroke ...	—	—	—	—	—	—	—	—	—
196. Electric shock ...	—	—	—	—	—	—	—	—	—
197. Murder by firearms ...	—	—	—	—	—	—	—	—	—
198. Murder by cutting or stabbing instruments ...	—	—	—	—	—	—	—	—	—
199. Murder by other means	—	—	—	—	—	—	—	—	—
200. Infanticide (murder of an infant under one year)	—	—	—	—	—	—	—	—	—
201. A.—Dislocation ...	—	2	—	2	—	6	—	6	8
B.—Sprain	—	9	—	9	2	29	7	36	45
C.—Fracture	1	22	1	23	—	12	4	16	39

TABLES V AND VI—*continued.*
EUROPEANS (OFFICIAL AND NON-OFFICIAL).
RETURN OF DISEASES AND DEATHS (IN-PATIENTS) AND OF DISEASES (OUT-PATIENTS) FOR THE YEAR 1930—*continued.*

DISEASES	In-Patients					Out-Patients			Total Cases In- and Out-Patients
	Remaining in Hospitals at the end of 1929	Yearly Total		Total Cases Treated	Remaining in Hospitals at the end of 1930	Males	Females	Total	
		Admissions	Deaths						
02. Other external injuries	2	26	1	28	—	102	14	116	144
03. Deaths by violence of unknown cause	—	—	—	—	—	—	—	—	—
V.—Ill-Defined Diseases.									
04. Sudden death (cause unknown)	—	—	—	—	—	—	—	—	—
05. A.—Diseases not already specified or ill-defined	—	5	—	5	—	—	—	—	5
Ascites	—	—	—	—	—	—	—	—	—
Œdema	—	—	—	—	—	—	—	—	—
Asthenia	—	15	—	15	1	49	37	86	101
Shock	—	1	—	1	—	—	1	1	2
Hyperpyrexia	—	—	—	—	—	—	—	—	—
Neuralgia and headache not yet diagnosed ...	1	22	—	23	1	13	11	24	47
Pyrexia of uncertain origin	2	55	—	57	—	16	9	25	82
Debility	—	—	—	—	—	—	—	—	—
Other Ill-defined diseases	—	1	—	1	—	3	22	25	26
B.—Malingering	—	1	—	1	—	—	—	—	1
TOTAL	32	2,133	38	2,165	31	2,049	1,040	3,089	5.254

TABLES V AND VI.

FOR ALL DENOMINATIONS.

RETURN OF DISEASES AND DEATHS (IN-PATIENTS) AND OF DISEASES (OUT-PATIENTS) FOR THE YEAR 1930.

DISEASES	In-Patients					Out-Patients			Total Cases In- and Out-Patients
	Remaining in Hospitals at the end of 1929	Yearly Total		Total Cases Treated	Remaining in Hospitals at the end of 1930	Males	Females	Total	
		Admissions	Deaths						
I.—Epidemic, Endemic, and Infectious Diseases.									
1. Enteric Group—									
(a) Typhoid fever	2	24	6	26	2	—	—	—	26
(b) Paratyphoid A	1	5	1	6	—	—	—	—	6
(c) Paratyphoid B	—	1	—	1	—	—	—	—	1
(d) Type not defined	—	3	1	3	—	—	—	—	3
2. Typhus	—	—	—	—	—	—	—	—	—
3. Relapsing fever	2	305	8	307	5	126	29	155	462
4. Undulant fever	—	—	—	—	—	—	—	—	—
5. Malaria									
(a) Tertian	8	880	8	888	9	2,433	810	3,243	4,131
(b) Quartan	—	5	—	5	—	427	112	539	544
(c) Aestivo-autumnal	44	3,978	31	4,022	54	19,808	5,617	25,425	29,447
(d) Cachexia	5	191	6	196	3	504	179	683	879
(e) Blackwater fever	1	64	20	65	—	2	2	4	69
(f) Unclassified	3	274	3	277	8	2,338	542	2,880	3,157
(g) Cerebral	—	11	8	11	—	—	—	—	11
6. Smallpox	—	41	2	41	1	—	—	—	41
Alastrim	—	—	—	—	—	—	—	—	—
7. Measles	1	19	—	20	—	9	5	14	34
8. Scarlet fever	—	—	—	—	—	—	—	—	—
9. Whooping cough	2	6	—	8	1	68	39	107	115
10. Diphtheria	—	2	—	2	—	—	—	—	2
11. Influenza	13	760	8	773	9	1,804	494	2,298	3,071
12. Miliary fever	—	—	—	—	—	—	—	—	—
13. Mumps	—	15	1	15	1	84	48	132	147
14. Cholera	—	—	—	—	—	—	—	—	—
15. Epidemic diarrhœa	—	—	—	—	—	—	—	—	—
16. Dysentery—									
(a) Amœbic	16	412	44	428	12	441	149	590	1,018
(b) Bacillary	3	101	7	104	—	92	25	117	221
(c) Undefined or due to other causes	6	105	22	111	3	386	100	486	597
17. Plague—	—	—	—	—	—	—	—	—	—
(a) Bubonic	—	2	2	2	—	—	—	—	2
(b) Pneumonic	—	10	9	10	—	—	—	—	10
(c) Septicæmic	—	—	—	—	—	—	—	—	—
(d) Undefined	—	—	—	—	—	—	—	—	—
18. Yellow fever	—	—	—	—	—	—	—	—	—
19. Spirochætosis ictero-hæmorrhagica	—	—	—	—	—	—	—	—	—
20. Leprosy	173	390	18	563	164	256	116	372	935
21. Erysipelas	2	8	—	10	—	5	—	5	15
22. Acute polio-myelitis	—	2	2	2	—	—	—	—	2
23. Encephalitis Lethargica	—	1	—	1	1	—	—	—	1
24. Epidemic cerebro-spinal fever	—	9	5	9	—	—	—	—	9
25. Other Epidemic Diseases—									
(a) Rubeola (German Measles)	—	13	1	13	—	1	—	1	14
(b) Varicella (chickenpox)	5	241	—	246	2	78	21	99	345
(c) Kala-Azar	—	—	—	—	—	—	—	—	—
(d) Phlebotomus fever	—	—	—	—	—	—	—	—	—
(e) Dengue	—	3	—	3	—	1	—	1	4
(f) Epidemic dropsy	—	—	—	—	—	—	—	—	—
(g) Yaws	105	2,397	16	2,502	122	41,006	34,570	75,576	78,078
(h) Trypanosomiasis	161	354	67	515	61	6	1	7	522

TABLES V AND VI—*continued.*

FOR ALL DENOMINATIONS.

RETURN OF DISEASES AND DEATHS (IN-PATIENTS) AND OF DISEASES (OUT-PATIENTS) FOR THE YEAR 1930—*continued.*

DISEASES	In-Patients					Out-Patients			Total Cases In- and Out-Patients
	Remaining in Hospitals at the end of 1929	Yearly Total		Total Cases Treated	Remaining in Hospitals at the end of 1930	Males	Females	Total	
		Admissions	Deaths						
26. Glanders	—	—	—	—	—	—	—	—	—
27. Anthrax	1	8	3	9	—	8	4	12	21
28. Rabies	—	1	1	1	—	—	—	—	1
29. Tetanus...	—	14	7	14	1	2	1	3	17
30. Mycosis	—	3	—	3	—	1	—	1	4
31. Tuberculosis, Pulmonary and Laryngeal	26	279	65	305	32	189	58	247	552
32. Tuberculosis of the Meninges or Central Nervous System	—	3	2	3	—	2	—	2	5
33. Tuberculosis of the Intestines or Peritoneum	—	9	4	9	1	—	1	1	10
34. Tuberculosis of the Vertebral Column ...	—	25	2	25	8	13	12	25	50
35. Tuberculosis of Bones and Joints	5	40	4	45	3	14	1	15	60
36. Tuberculosis of other organs—									
(a) Skin or subcutaneous tissue (Lupus)	1	2	—	3	—	7	1	8	11
(b) Bones	3	8	1	11	5	3	—	3	14
(c) Lymphatic System ...	4	52	3	56	9	50	47	97	153
(d) Genito-urinary ...	—	2	1	2	—	1	—	1	3
(e) Other organs	—	6	1	6	1	29	5	34	40
37. Tuberculosis disseminated—									
(a) Acute	—	1	1	1	—	1	—	1	2
(b) Chronic	—	2	—	2	—	5	1	6	8
38. Syphilis—									
(a) Primary	7	361	—	368	21	2,284	1,512	3,796	4,164
(b) Secondary	10	494	4	504	29	2,145	1,640	3,785	4,289
(c) Tertiary	21	365	11	386	15	2,786	2,822	5,608	5,994
(d) Hereditary	2	58	10	60	5	594	633	1,227	1,287
(e) Period not indicated...	1	39	1	40	—	665	497	1,162	1,202
39. Soft Chancre	4	13	—	17	—	35	10	45	62
40. A.—Gonorrhœa and its complications	31	745	5	776	27	4,985	615	5,600	6,376
B.—Gonorrhœal Ophthalmia	—	15	—	15	1	39	16	55	70
C.—Gonorrhœal arthritis	2	14	—	16	1	74	12	86	102
D.—Granuloma Venereum	—	3	1	3	—	—	—	—	3
41. Septicæmia	—	21	8	21	1	7	—	7	28
42. Other infectious diseases	—	—	—	—	—	153	85	238	238
II.—General Diseases not mentioned above.									
43. Cancer or other malignant Tumours of the Buccal Cavity	—	6	1	6	—	3	1	4	10
44. Cancer or other malignant Tumours of the Stomach or liver ...	—	2	—	2	—	—	—	—	2
45. Cancer or other malignant Tumours of the Peritoneum or Intestines, Rectum	—	5	1	5	—	1	1	2	7
46. Cancer or other malignant Tumours of the Female Genital Organs ...	1	12	2	13	1	—	2	2	15

TABLES V and VI—*continued.*

For all Denominations.

Return of Diseases and Deaths (In-Patients) and of Diseases (Out-Patients) for the Year 1930—*continued.*

DISEASES	In-Patients					Out-Patients			Total Cases In- and Out-Patients
	Remaining in Hospitals at the end of 1929	Yearly Total		Total Cases Treated	Remaining in Hospitals at the end of 1930	Males	Females	Total	
		Admissions	Deaths						
47. Cancer or other malignant Tumours of the Breast	—	3	—	3	2	—	2	2	5
48. Cancer or other malignant Tumours of the Skin	1	7	—	8	—	13	6	19	27
49. Cancer or other malignant Tumours of Organs not specified	2	26	9	28	4	4	3	7	35
50. Tumours, non-malignant	4	129	1	133	9	45	28	73	206
51. Acute rheumatism ...	5	72	1	77	4	1,249	492	1,741	1,818
52. Chronic rheumatism ...	5	168	2	173	4	1,576	434	2,010	2,183
52. Scurvy (including Barlow's disease) ...	—	5	—	5	—	3	6	9	14
54. Pellagra	—	—	—	—	—	19	—	19	19
55. Beri-beri	1	44	2	45	11	9	—	9	54
56. Rickets	—	6	1	6	1	5	5	10	16
57. Diabetes (not including Insipidus)	—	7	2	7	—	8	5	13	20
58. Anæmia—									
(a) Pernicious	9	24	1	33	1	24	12	36	69
(b) Other Anæmias and Chlorosis	2	53	8	55	—	230	120	350	405
59. Diseases of the Pituitary Body	—	—	—	—	—	46	17	63	63
60. Diseases of the Thyroid Gland—									
(a) Exophthalmic Goitre	1	1	—	2	—	13	6	19	21
(b) Other diseases of the Thyroid Gland, Myxœdema	—	5	—	5	—	5	1	6	11
61. Diseases of the Parathyroid Glands	—	1	—	1	—	—	—	—	1
62. Diseases of the Thymus	—	—	—	—	—	—	—	—	—
63. Diseases of the Supra-Renal Glands	—	—	—	—	—	1	—	1	1
64. Diseases of the Spleen	2	39	2	41	1	516	331	847	888
65. Leukæmia—									
(a) Leukæmia	1	5	2	6	1	24	25	49	55
(b) Hodgkins disease ...	—	—	—	—	—	—	—	—	—
66. Alcoholism	—	8	—	8	—	1	—	1	9
67. Chronic poisoning by mineral substance (lead, mercury, etc.)	—	—	—	—	—	—	—	—	—
68. Chronic poisoning by organic substance (morphia, cocaine, etc.) ...	—	—	—	—	—	—	—	—	—
69. Other General Diseases—									
Auto-intoxication ...	—	—	—	—	—	—	—	—	—
Purpura-hæmorrhagica ...	—	—	—	—	—	—	—	—	—
Hæmophilia	—	1	1	1	—	2	—	2	3
Diabetes Insipidus ...	—	—	—	—	—	1	—	1	1
Other General Diseases ...	—	—	—	—	—	—	1	1	1
III.—Affections of the Nervous System and Organs of Senses.									
70. Encephalitis (not including Encephalitis Lethargica)	1	2	1	3	—	—	—	—	3

TABLES V AND VI—*continued.*

FOR ALL DENOMINATIONS.

RETURN OF DISEASES AND DEATHS (IN-PATIENTS) AND OF DISEASES (OUT-PATIENTS) FOR THE YEAR 1930—*continued.*

DISEASES	In-Patients					Out-Patients			Total Cases In- and Out-Patients
	Remaining in Hospitals at the end of 1929	Yearly Total		Total Cases Treated	Remaining in Hospitals at the end of 1930	Males	Females	Total	
		Admissions	Deaths						
71. Meningitis (not including Tuberculous Meningitis or Cerebro-spinal Meningitis)	—	8	7	8	—	1	—	1	9
72. Locomotor Ataxia	3	3	1	6	2	4	1	5	11
73. Other affections of the Spinal Cord	—	4	1	4	1	8	—	8	12
74. Apoplexy—									
(a) Hemiplegia	3	23	3	26	1	17	3	20	46
(b) Embolism	—	1	1	1	—	—	—	—	1
(c) Thrombosis	—	3	3	3	—	—	—	—	3
75. Paralysis—									
(a) Hæmorrhage	—	16	3	16	1	—	—	—	16
(b) Other Paralysis	3	48	7	51	4	23	13	36	87
76. General Paralysis of the Insane	—	4	1	4	—	—	—	—	4
77. Other forms of Mental Alienation	1	60	1	61	4	21	2	23	84
78. Epilepsy	3	68	3	71	5	118	64	182	253
79. Eclampsia, convulsions (non-puerperal) five years and over	—	4	1	4	—	—	—	—	4
80. Infantile convulsions	—	2	—	2	—	4	2	6	8
81. Chorea	—	2	—	2	—	2	—	2	4
82. A.—Hysteria	—	15	—	15	—	16	10	26	41
B.—Neuritis	1	51	—	52	2	734	193	927	979
C.—Neurasthenia	—	36	—	36	1	246	108	354	390
83. Cerebral softening	—	—	—	—	—	1	—	1	1
84. Other affections of the Nervous System such as Paralysis Agitans	5	28	4	33	4	323	70	393	426
85. Affections of the Organs of Vision									
(a) Diseases of the eye	9	196	—	205	4	246	103	349	554
(b) Conjunctivitis	12	498	—	510	6	10,561	6,951	17,512	18,022
(c) Trachoma	5	33	—	38	6	218	150	368	406
(d) Tumours of the eye	—	4	—	4	—	10	4	14	18
(e) Other affections of the eye	17	313	2	330	10	1,231	532	1,763	2,093
86. Affections of the Ear or Mastoid Sinus	2	126	3	128	2	4,522	2,032	6,554	6,682
IV.—Affections of the Circulatory System.									
87. Pericarditis	—	4	4	4	—	3	2	5	9
88. Acute Endocarditis or Myocarditis	—	4	1	4	—	2	—	2	6
89. Angina Pectoris	—	—	—	—	—	4	4	8	8
90. Other diseases of the Heart—									
(a) Valvular	—	38	7	38	—	89	40	129	167
Mitral	—	16	2	16	—	18	9	27	43
Aortic	—	5	1	5	—	12	6	18	23
Tricuspid	—	1	1	1	—	—	—	—	1
Pulmonary	—	3	—	3	—	1	1	2	5
(b) Myocarditis	—	13	3	13	—	9	4	13	26
91. Diseases of the Arteries—									
(a) Aneurism	—	5	2	5	—	6	—	6	11
(b) Arterio-Sclerosis	—	4	1	4	—	3	—	3	7
(c) Other diseases	—	1	—	1	—	5	—	5	6

TABLES V AND VI—*continued.*

FOR ALL DENOMINATIONS.

RETURN OF DISEASES AND DEATHS (IN-PATIENTS) AND OF DISEASES (OUT-PATIENTS) FOR THE YEAR 1930—*continued.*

DISEASES	In-Patients					Out-Patients			Total Cases In- and Out-Patients
	Remaining in Hospitals at the end of 1929	Yearly Total		Total Cases Treated	Remaining in Hospitals at the end of 1930	Males	Females	Total	
		Admissions	Deaths						
92. Embolism or Thrombosis (non-cerebral)	—	2	—	2	—	1	—	1	3
93. Diseases of the Veins—									
Hæmorrhoids	—	22	—	22	—	50	7	57	79
Varicose	—	3	—	3	1	7	—	7	10
Phlebitis	—	10	—	10	1	16	1	17	27
94. Disoases of the Lymphatic System—									
Filariasis	—	30	3	30	1	13	1	14	44
Lymphangitis	1	30	—	31	—	153	35	188	219
Lymphadenitis, Bubo (not specific)	3	147	—	150	6	326	35	361	511
95. Hæmorrhage of undetermined cause	—	3	—	3	—	5	2	7	10
96. Other affections of the Circulatory System ...	—	12	2	12	—	12	12	24	36
V.—Affections of the Respiratory System.									
97. Diseases of the Nasal Passages—									
Adenoids	—	5	—	5	1	14	5	19	24
Polypus	—	—	—	—	—	—	3	3	3
Rhinitis	2	6	1	8	—	87	14	101	109
Coryza	—	159	—	159	—	3,354	819	4,173	4,332
98. Affections of the Larynx—									
Laryngitis	—	18	1	18	—	149	53	202	220
99. Bronchitis—									
(a) Acute	24	733	19	757	18	20,853	8,758	29,611	30,368
(b) Chronic	7	238	8	245	14	4,434	1,349	5,783	6,028
(c) Unclassified	—	16	—	16	—	1,750	849	2,599	2,615
100. Broncho-pneumonia ...	5	257	66	262	3	133	103	236	498
101. Pneumonia—									
(a) Lobar	15	649	143	664	28	163	59	222	886
(b) Unclassified	—	8	1	8	—	18	7	25	33
102. Pleurisy, Empyema ...	5	97	8	102	2	134	24	158	260
103. Congestion of the Lungs	—	5	2	5	—	2	3	5	10
104. Gangrene of the lungs	—	2	1	2	—	—	—	—	2
105. Asthma	3	117	3	120	3	385	127	512	632
106. Pulmonary Emphysema	—	2	1	2	—	3	—	3	5
107. Other affections of the Lungs—									
Pulmonary Spirochætosis	1	9	—	10	—	1	—	1	11
Other affections of the Respiratory System ...	—	3	—	3	—	23	2	25	28
VI.—Diseases of the Digestive System.									
108. A.—Diseases of Teeth or Gums—									
Caries, Pyorrhœa, etc. ...	2	109	1	111	3	6,262	3,145	9,407	9,518
B.—Other affections of the Mouth—									
Stomatitis, Glossitis, etc.	3	104	5	107	2	1,248	489	1,737	1,844
109. Affections of the Pharnyx or Tonsils—									
Tonsillitis, Pharyngitis ...	6	201	2	207	1	3,534	1,315	4,849	5,056

TABLES V AND VI—*continued.*

FOR ALL DENOMINATIONS.

RETURN OF DISEASES AND DEATHS (IN-PATIENTS) AND OF DISEASES (OUT-PATIENTS) FOR THE YEAR 1930—*continued.*

DISEASES	In-Patients					Out-Patients			Total Cases In- and Out-Patients
	Remaining in Hospitals at the end of 1929	Yearly Total		Total Cases Treated	Remaining in Hospitals at the end of 1930	Males	Females	Total	
		Admissions	Deaths						
110. Affections of the Œsophagus	—	1	—	1	—	36	10	46	47
111. A.—Ulcer of the Stomach	1	4	2	5	—	3	1	4	9
B.—Ulcer of the Duodenum	—	9	—	9	—	2	—	2	11
112. Other affections of the Stomach—									
Gastritis, Dyspepsia, etc.	3	145	—	148	5	2,011	1,003	3,014	3,162
113. Diarrhœa and Enteritis—Under two years ...	16	120	5	136	3	1,514	816	2,330	2,466
114. Diarrhœa and Enteritis—									
Two years and over ...	20	656	108	676	17	2,797	697	3,494	4,170
Colitis	2	78	5	80	3	1,285	566	1,851	1,931
Ulceration	—	4	1	4	—	40	43	83	87
114A. Sprue...	—	2	—	2	—	—	—	—	2
115. Ankylostomiasis ...	75	1,184	193	1,259	75	4,618	3,498	8,116	9,375
116. Diseases due to Intestinal Parasites—									
(a) Cestoda (Tænia) ...	6	148	5	154	5	4,495	1,633	6,128	6,282
(b) Trematoda (Flukes)	—	—	—	—	—	31	9	40	40
(c) Nematoda (other than Ankylostoma)	—	6	—	6	—	537	658	1,195	1,201
Ascaris	4	83	1	87	—	4,228	4,044	8,272	8,359
Trichocephalus dispar ...	—	5	—	5	—	28	25	53	58
Trichina	—	1	—	1	—	1	1	2	3
Dracunculus	—	1	—	1	—	7	1	8	9
Strongylus	—	6	1	6	—	13	11	24	30
Oxyuris	—	4	—	4	—	237	76	313	317
(d) Coccidia	—	—	—	—	—	—	—	—	—
(e) Other parasites ...	1	19	1	20	—	179	74	253	273
(f) Unclassified	—	5	1	5	—	10	4	14	19
117. Appendicitis	1	39	2	40	1	6	7	13	53
118. Hernia...	27	391	10	418	33	109	2	111	529
119. Affections of the Anus, Fistula, etc.	1	34	3	35	4	39	16	55	90
B.—Other affections of the Intestines—									
Enteroptosis	1	101	2	102	2	301	16	317	419
Constipation	1	179	—	180	3	21,245	8,133	29,378	29,558
120. Acute Yellow Atrophy of the Liver	—	1	1	1	—	—	—	—	1
121. Hydatid of the Liver	—	—	—	—	—	—	—	—	—
122. Cirrhosis of the Liver—									
(a) Alcoholic	2	16	6	18	—	3	—	3	21
(b) Other forms	3	33	11	36	3	11	4	15	51
123. Bacillary Calculus ...	—	3	2	3	—	—	1	1	4
124. Other affections of the Liver—									
Abscess	2	41	5	43	4	13	6	19	62
Hepatitis	1	53	5	54	1	211	76	287	341
Cholecystitis	1	10	—	11	—	3	1	4	15
Jaundice	1	42	1	43	1	50	19	69	112
125. Diseases of the Pancreas	—	1	—	1	—	2	—	2	3
126. Peritonitis (of unknown cause)	—	8	6	8	1	—	—	—	8
127. Other affections of the Digestive System ...	1	63	3	64	—	1,495	400	1,895	1,959

TABLES V AND VI—*continued.*

FOR ALL DENOMINATIONS.

RETURN OF DISEASES AND DEATHS (IN-PATIENTS) AND OF DISEASES (OUT-PATIENTS) FOR THE YEAR 1930—*continued.*

DISEASES	In-Patients					Out-Patients			Total Cases In- and Out-Patients
	Remaining in Hospitals at the end of 1929	Yearly Total		Total Cases Treated	Remaining in Hospitals at the end of 1930	Males	Females	Total	
		Admissions	Deaths						
VII.—Diseases of the Genito-Urinary System (Non-Venereal).									
128. Acute Nephritis ...	—	30	6	30	1	26	9	35	65
129. Chronic Nephritis ...	—	34	14	34	3	10	1	11	45
130. A.—Chyluria	—	1	—	1	—	1	—	1	2
B.—Schistosomiasis ...	5	217	4	222	12	1,764	316	2,080	2,302
131. Other affections of the Kidneys—Pyelitis, etc.	1	17	1	18	—	14	8	22	40
132. Urinary Calculus ...	—	12	—	12	1	6	1	7	19
133. Diseases of the Bladder—Cystitis	2	43	3	45	1	156	37	193	238
134. Diseases of the Urethra—(a) Stricture	4	51	2	55	3	44	3	47	102
(b) Other	—	35	1	35	4	49	2	51	86
135. Diseases of the Prostate—Hypertrophy	2	2	—	4	—	1	—	1	5
Prostatis	—	14	1	14	—	7	—	7	21
136. Diseases (non-venereal) of the Organs of Man—Epididymitis	7	134	1	141	1	156	—	156	297
Orchitis	2	200	—	202	8	372	2	374	576
Hydrocele	22	415	4	437	26	144	—	144	581
Ulcer of Penis	3	108	—	111	6	72	—	72	183
137. Cysts or other non-malignant tumours of the Ovaries—	—	5	2	5	—	1	1	2	7
138. Salpingitis—Abscess of the Pelvis ...	1	11	—	12	1	—	6	6	18
139. Uterine Tumours (non-malignant)	2	14	—	16	2	—	5	5	21
140. Uterine Hæmorrhage (non-puerperal)	—	7	—	7	1	—	23	23	30
141. A.—Metritis	1	8	—	9	1	—	26	26	35
B.—Other affections of the Female Genital Organs ...	1	22	—	23	1	—	39	39	62
Displacement of Uterus...	—	7	1	7	—	—	17	17	24
Amenorrhœa	—	3	—	3	—	—	36	36	39
Dysmenorrhœa	—	13	—	13	2	—	162	162	175
Leucorrhœa	—	6	—	6	—	—	57	57	63
142. Diseases of the Breast—(non-puerperal)	—	1	—	1	—	—	7	7	8
Mastitis	—	18	—	18	1	—	253	253	271
Abscess of Breast ...	2	18	1	20	—	—	110	110	130
VIII.—Puerperal State.									
143. A.—Normal Labour	6	270	1	276	3	—	20	20	296
B.—Accidents of Pregnancy—									
(a) Abortion	—	50	1	50	—	—	23	23	73
(b) Ectopic Gestation ...	—	2	—	2	—	—	6	6	8
(c) Other accidents of Pregnancy	1	48	5	49	2	—	54	54	103
144. Puerperal Hæmorrhage	—	4	2	4	—	—	4	4	8
145. Other accidents of Parturition	2	37	7	39	—	—	4	4	43

TABLES V AND VI—*continued.*

FOR ALL DENOMINATIONS.

RETURN OF DISEASES AND DEATHS (IN-PATIENTS) AND OF DISEASES (OUT-PATIENTS) FOR THE YEAR 1930—*continued.*

DISEASES	In-Patients					Out-Patients			Total Cases In- and Out-Patients
	Remaining in Hospitals at the end of 1929	Yearly Total		Total Cases Treated	Remaining in Hospitals at the end of 1930	Males	Females	Total	
		Admissions	Deaths						
146. Puerperal Septicæmia	—	12	6	12	—	—	1	1	13
147. Phlegmasia Dolens ...	—	—	—	—	—	—	2	2	2
148. Puerperal Eclampsia	—	3	2	3	—	—	—	—	3
149. Sequelœ of Labour ...	—	6	1	6	—	—	7	7	13
150. Puerperal affections of the Breast	—	—	—	—	—	—	5	5	5
IX.—Affections of the Skin and Cellular Tissues.									
151. Gangrene	7	51	7	58	3	16	3	19	77
152. Boil	3	92	—	95	—	1,978	374	2,352	2,447
153. Abscess Carbuncle ...	39	616	9	655	34	1,608	346	1,954	2,609
Whitlow	—	40	—	40	3	294	131	425	465
Cellulitis	16	368	10	384	11	2,259	471	2,730	3,114
Ulcer	332	3,327	31	3,659	296	19,992	4,694	24,686	28,345
154. A.—Tinea	—	13	—	13	—	676	373	1,049	1,062
B.—Scabies	5	131	2	136	6	7,354	2,703	10,057	10,193
155. Other affections of the Skin—									
Erythema...	1	4	2	5	7	9	8	17	22
Urticaria	—	20	—	20	—	133	44	177	197
Eczema	3	50	—	53	7	991	321	1,312	1,365
Herpes	1	17	—	18	1	78	25	103	121
Psoriasis	—	5	—	5	1	75	20	95	100
Elephantiasis	7	126	7	133	15	69	28	97	230
Myiasis	—	6	—	6	—	45	28	73	79
Chigoes	2	81	3	83	3	616	191	807	890
Cutaneous Leishmaniasis	—	4	—	4	—	4	—	4	8
Other Skin Diseases ...	2	91	3	93	4	1,342	360	1,702	1,795
X.—Diseases of Bones and Organs of Locomotion (other than Tuberculosis).									
156. Diseases of Bones—									
Osteitis	6	70	3	76	4	188	62	250	326
157. Diseases of Joints—									
Arthritis	12	123	7	135	9	418	87	505	640
Synovitis	3	57	—	60	3	471	106	577	637
158. Other Diseases of Bones and Organs of Locomotion.	11	218	—	229	6	6,093	1,362	7,455	7,684
XI.—Malformations.									
159. Malformations—									
Hypospadias	—	1	—	1	—	—	—	—	1
Hydrocephalus	1	—	—	1	—	—	—	—	1
Spina Bifida, etc. ...	—	—	—	—	—	1	—	1	1
XII.—Diseases of Infancy.									
160. Congenital Debility ...	—	7	3	7	—	7	6	13	20
161. Premature Birth ...	—	1	1	1	—	1	—	1	2
162. Other affections of Infancy	—	7	2	7	—	5	1	6	13
163. Infant neglect (infants of three months or over)...	1	1	—	2	—	—	—	—	2
XIII.—Affections of old Age.									
164. Senility	4	19	12	23	—	26	4	30	53
Senile Dementia	—	1	—	1	—	—	—	—	1

TABLES V AND VI—*continued.*

FOR ALL DENOMINATIONS.

RETURN OF DISEASES AND DEATHS (IN-PATIENTS) AND OF DISEASES (OUT-PATIENTS) FOR THE YEAR 1930—*continued.*

DISEASES	In-Patients					Out-Patients			Total Cases In- and Out-Patients
	Remaining in Hospitals at the end of 1929	Yearly Total Admissions	Yearly Total Deaths	Total Cases Treated	Remaining in Hospitals at the end of 1930	Males	Females	Total	
XIV.—Affections produced by External Causes.									
165. Suicide by poisoning	—	—	—	—	—	—	—	—	—
166. Corrosivo poisoning (intentional)	—	7	—	7	—	—	—	—	7
167. Suicide by gas poisoning	—	—	—	—	—	—	—	—	—
168. Suicide by hanging or strangulation	—	1	1	1	—	—	—	—	1
169. Suicide by drowning	—	1	—	1	—	—	—	—	1
170. Suicide by firearms ...	—	—	—	—	—	—	—	—	—
171. Suicide by cutting or stabbing instruments ...	—	1	—	1	—	7	1	8	9
172. Suicide by jumping from a height	—	—	—	—	—	—	—	—	—
173. Suicide by crushing ...	—	—	—	—	—	—	—	—	—
174. Other Suicides ...	—	—	—	—	—	—	—	—	—
175. Food poisoning ...	—	13	1	13	—	2	2	4	17
Botulism	—	—	—	—	—	—	—	—	—
176. Attacks of Poisonous Animals—									
Snake bite	2	39	1	41	2	83	28	111	152
Insect bite	—	9	—	9	—	184	50	234	243
Others	—	1	—	1	—	1	—	1	2
177. Other accidental poisonings	1	12	2	13	2	1	1	2	15
178. Burns (by fire) ...	12	166	19	178	17	671	321	992	1,170
179. Burns (other than by fire)	2	43	3	45	1	205	61	266	311
180. Suffocation (accidental)	—	—	—	—	—	2	2	4	4
181. Poisoning by gas (accidental)	—	—	—	—	—	—	—	—	—
182. Drowning (accidental)	—	1	—	1	—	—	—	—	1
183. Wounds (by firearms, war excepted)	6	49	5	55	4	12	2	14	69
184. Wounds (by cutting or stabbing instruments ...	12	536	17	548	26	3,655	787	4,442	4,990
185. Wounds (by fall) ...	18	330	5	348	17	3,035	492	3,527	3,875
186. Wounds (in Mines or Quarries)	—	10	—	10	—	—	—	—	10
187. Wounds (machinery)	21	221	8	242	16	102	—	102	344
188. Wounds (crushing, e.g. railway accidents, etc.)...	8	81	5	89	3	63	17	80	169
189. Injuries inflicted by animals, bites, kicks, etc.	8	178	16	186	14	835	262	1,097	1,283
190. Wounds inflicted on active service	—	1	—	1	—	—	—	—	1
191. Execution of civilians by belligerents	—	—	—	—	—	—	—	—	—
192. A.—Over fatigue ...	—	—	—	—	—	1	—	1	1
B.—Hunger or thirst ...	—	6	1	6	—	12	—	12	18
193. Exposure to cold, frost, etc.	—	1	—	1	—	64	13	77	78
194. Exposure to heat—									
Heatstroke	—	8	—	8	—	5	—	5	13
Sunstroke	—	—	—	—	—	—	—	—	—
195. Lightning stroke ...	2	1	—	3	—	8	—	8	11
196. Electric shock ...	—	—	—	—	—	—	—	—	—

TABLES V AND VI—*continued.*

FOR ALL DENOMINATIONS.

RETURN OF DISEASES AND DEATHS (IN-PATIENTS) AND OF DISEASES (OUT-PATIENTS) FOR THE YEAR 1930—*continued.*

DISEASES	In-Patients					Out-Patients			Total Cases In- and Out-Patients
	Remaining in Hospitals at the end of 1929	Yearly Total		Total Cases Treated	Remaining in Hospitals at the end of 1930	Males	Females	Total	
		Admissions	Deaths						
7. Murder by Firearms	—	—	—	—	—	—	—	—	—
8. Murder by cutting or stabbing instruments ...	—	—	—	—	—	—	—	—	—
9. Murder by other means	—	—	—	—	—	—	—	—	—
0. Infanticide (murder of an infant under one year)	—	—	—	—	—	—	—	—	—
1. A.—Dislocation ...	2	39	—	41	—	40	18	58	99
B.—Sprain	—	130	—	130	3	1,021	170	1,191	1,321
C.—Fracture	57	387	26	444	52	78	17	95	539
2. Other external injuries	33	758	5	791	23	16,258	1,619	17,877	18,668
3. Deaths by violence of unknown cause	—	—	—	—	—	—	—	—	—
V.—Ill-Defined Diseases.									
4. Sudden death (cause unknown)	—	—	—	—	—	—	—	—	—
5. A.—Diseases not already specified, ill-defined—									
Ascites	8	81	25	89	3	27	13	40	129
Œdema	—	16	—	16	—	83	37	120	136
Asthenia	1	170	35	171	9	45	23	68	239
Shock	—	5	—	5	—	—	3	3	8
Hyperpyrexia	—	4	—	4	—	13	3	16	20
Neuralgia and headache not yet diagnosed ...	5	107	2	112	1	3,234	717	3,951	4,063
Pyrexia of uncertain origin	23	224	2	247	4	971	321	1,292	1,539
Debility	—	—	—	—	—	496	213	709	709
Other Ill-defined diseases	—	1	—	1	—	85	82	167	168
B.—Malingering	—	10	—	10	—	27	—	27	37
TOTAL	1,758	33,052	1,525	34,810	1,645	273,811	119,972	393,783	428,593
otal cases treated by Medical Staff on tour... ...	—	153	12	153	—	68,781	57,863	126,644	126,797
otal cases treated by African Dispensers ...	—	683	7	683	5	25,111	14,781	39,892	40,575
otal cases treated by Missionaries supplied with Government drugs and equipment	—	197	9	197	—	8,222	4,469	12,691	12,888
GRAND TOTAL ...	1,758	34,085	1,553	35,843	1,650	375,925	197,085	573,010	608,853

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